

() SIBLING'S DISCOUNT (if you have sibling/s currently enrolled in LPU Davao)

1st Sibling: 10% Tuition Fee Discount

2nd Sibling: 15% Tuition Fee Discount

Student No.: _____

Student No.: _____

Name: _____

Name: _____

I declare that the above information provided herein are true and correct.

(Student's Signature over Printed Name)

Date: _____

Verified and Encoded by Office of the Registrar

Name/ Signature: _____

Date: _____