The President

The Philippine Women’s University

Taft Avenue, Manila

Through Channels

Dear Sir/Madam:

This is to request for tuition grant to administrators, faculty members and personnel as stated in the PWU Incentive Program Manual.

I hereby submit the following application form for your consideration.

**APPLICATION FORM**

**ADMINISTRATORS/FACULTY/NTP TUITION PRIVILEGE**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Classification: Teaching ( ) **FOR HRDMD ONLY**

Non-Teaching ( ) No. of Years : \_\_\_\_\_\_\_\_\_\_\_\_\_

Tuition Privilege applied for SY \_\_\_\_\_\_\_\_\_\_\_\_ Date joined in PWU : \_\_\_\_\_\_\_\_\_\_\_\_\_

* 1st Trimester \_\_\_\_\_\_\_\_\_\_ years of service as PART TIME
* 2nd Trimester \_\_\_\_\_\_\_\_\_\_years of service as FULL TIME
* 3rd Trimester

Verified by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **NAME** | **RELATIONSHIP** | **COURSE/YEAR LEVEL** |
|  |  |  |
|  |  |  |
|  |  |  |

Thank you very much.

Sincerely yours,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recommended by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean/ Department Head

**APPLICATION PROCEDURES:**

1. Application form may be requested from the Scholarship Committee at the Office of the President
2. Administrators/Faculty members/personnel secure service verification/certification form HRDMD
3. Administrators/Faculty members/personnel submit duly filled up form to the Dean/Head for endorsement to Scholarship Committee at least (1) **one month** beforethe start of the SY/Trimester
4. The Scholarship Committee convenes and submits recommendation to the President for final approval
5. Application must be submitted and duly approved before the tuition privileges may be enjoyed