

**UNIVERSITY OF THE PHILIPPINES MANILA**  
Ermita, Manila

**TRISTAN NATHANIEL C. RAMOS, DDM, MPH**  
Director, Office of Student Affairs

Dear Dr. Ramos,

I have the honor to request for the refund of my tuition fees for \_\_\_\_\_ semester/s,  
school year \_\_\_\_\_ - \_\_\_\_\_ in view of the reason/s below:

[        ] *New STS bracket assignment*    [        ] *STS Approved Appeal*  
[        ] *Others* \_\_\_\_\_

Thank you.

Very truly yours,

\_\_\_\_\_  
(Signature over printed name)

Attachments:

[        ] Official Receipt  
[        ] Class List from SAIS or Invoice  
[        ] Approved STS result

(NOTE: Submit 2 photocopies each and bring the original for verification/authentication)

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**OFFICE OF STUDENT AFFAIRS**  
First Indorsement

Respectfully forwarded to the Cashier, UP Manila recommending approval of the STS  
tuition fee refund of Mr./Miss \_\_\_\_\_  
of the College of \_\_\_\_\_ for \_\_\_\_\_ semester/s  
schoolyear \_\_\_\_\_ - \_\_\_\_\_ with Partial Discount \_\_\_\_\_.

**Amount to be refunded: P** \_\_\_\_\_

**TRISTAN NATHANIEL C. RAMOS, DDM, MPH**  
Director, Office of Student Affairs

CONTACT NUMBER: \_\_\_\_\_

PERMANENT ADDRESS: \_\_\_\_\_