



**DE LA SALLE UNIVERSITY-DASMARIÑAS
COLLEGE OF BUSINESS ADMINISTRATION
Dasmariñas, Cavite**

**CONTRACT OF CONDITIONAL ADMISSION
(For shiftees and transferees)**

This is to certify that I, _____, agree to my being accepted into the College of Business Administration on a conditional basis this _____ semester, school year _____.

As a condition for my retention, I will abide by the CBA policy to pass all my enrolled subjects. In the event that I incur a failing grade during the _____ semester, school year _____, I give the right to the CBA not to readmit me.

Signature of student

Student Number

Conforme :

Signature Over Printed Name of Parent/ Guardian