



**JOHN B. LACSON COLLEGES FOUNDATION (BACOLOD), INC.**  
 (Formerly Iloilo Maritime Academy)  
 Alijis, Bacolod City



**BED Form 8**

To be accomplished in three (3) copies

**BASIC EDUCATION DEPARTMENT**  
**DepEd School ID No. 403019**

Copy for:

**Changing/Adding/Dropping of Subjects/Withdrawal of Enrollment**

Date \_\_\_\_\_

The Principal  
 Basic Education Department

Dear Sir/Ma'am:

On behalf of my son/daughter, \_\_\_\_\_, of Grade \_\_\_\_\_ Section \_\_\_\_\_

- I would like to withdraw his/her enrolment.
- I would like to request for his/her transfer/shift of strand.  
 From \_\_\_\_\_ To \_\_\_\_\_

I would like to request for the Changing/Dropping/Adding of Subject(s).

**SUBJECT(S) TO BE DROPPED**

**SUBJECT(S) TO BE ADDED**

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

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

This request is effective on \_\_\_\_\_, 20 \_\_\_\_ for the following reason/s \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Very respectfully yours,

Approved by:

\_\_\_\_\_  
 (Parent's Name & Signature)

\_\_\_\_\_  
 Relationship  
 (for authorized representative only)

\_\_\_\_\_  
 Principal

*"To maintain the highest standards of Quality, Health, Safety, Environmental Protection and Pollution Prevention in our consistent drive to satisfy and strive to exceed"*

