



University of the Philippines
OPEN UNIVERSITY
College, Laguna 4031
Philippines

CERTIFICATE OF TEACHING LOAD
(For teacher applicants only)

To the Applicant: Please complete Section 1 of this form and give this to your employer/supervisor for certification.

Section 1

Name of Applicant: Family Name First Name Middle Name

Position:

Office Address:

Program applied for: Major: Minor:

Guide to the Employer/Supervisor: The Person whose name appears above as applied for admission to the UP Open University. We will greatly appreciate your assistance in completing this form.

Section 2

Academic Subject(s) currently handled by the applicant: No. of years teaching:

Level: [] Elementary [] Secondary [] Tertiary

Subject(s)/Course(s) handled in the past: No. of years teaching:

I hereby certify that the information given herein is true to the best of my knowledge.

Signature: Date:
Printed Name:
Position/Title:
Mailing Address:

