



OFFICE OF THE VICE CHANCELLOR FOR STUDENT AFFAIRS
UNIVERSITY OF THE PHILIPPINES LOS BAÑOS

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OFFICE OF SCHOLARSHIPS AND GRANTS
Revised 08 MAY 2026

SAGA-OSG Form 02

SEPARATION FORM FOR STUDENT/GRADUATE ASSISTANTS

Date of Effectivity: Student #:

Name of Student Assistant:

Office:

Semester: 1st 2nd Midyear A.Y 20 - 20

RESIGNATION

Reason:

Signature of Student over Printed Name

Signature of Supervisor over Printed Name

TERMINATION

Due to failure to report for a continuous period of ten days without prior notice to the supervisor.

Signature of Supervisor over Printed Name

FOR SAGA-OSG STAFF USE ONLY

RECOMMENDING APPROVAL:

APPROVED/DISAPPROVED:

MARK KEVIN L. MOVILLON
SAGA Coordinator

ARIEL L. BABIERRA
Director

SAGA ITEM CODE: