



**DE LA SALLE UNIVERSITY–DASMARIÑAS**  
*Office of the Assistant Vice Chancellor for Academic Services*  
**STUDENT SCHOLARSHIP OFFICE**



**AGREEMENT FOR FINANCIAL AID GRANTEES (FAG)**

I, \_\_\_\_\_ (Financial Aid Grantee), a student of the College of \_\_\_\_\_, in consideration of the tuition scholarship/financial aid given to me by De La Salle University-Dasmariñas, do hereby agree with the following terms and conditions:

1. The duration of the tuition scholarship/financial aid grant shall be determined by my ability to complete the requirements set by the Student Scholarship Office;
2. I shall maintain a GPA of 2.50 (80-82) without any failing grades both in academic and non-academic subjects during the semester;
3. I shall not drop any of my subjects during the semester;
4. I shall not be charged or disciplined for any violation of school policies and regulations as provided in the Student Handbook;
5. I shall maintain good health in the duration of the tuition scholarship/financial aid grant;
6. I shall enroll a minimum of eighteen (18) units of academic load each semester without any failing grades in all subjects;
7. I will render a required hour of service based on the assessment of Student Scholarship Office.
8. I shall make myself available/present at all times during Scholarship General Assembly and other related activities;
9. I shall maintain a very satisfactory rating in my Performance Evaluation Report;
10. At the end of every semester, I shall submit report of grades obtained for the semester;
11. The scholarship grant is applicable for one (1) semester only, subject for application every semester upon completion of requirements set by the Student Scholarship Office.

Failure to comply with any of the foregoing terms and obligations means that my scholarship/financial aid grant shall be terminated.

**IN WITNESS WHEREOF**, I have hereunder set my signature this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at De La Salle University-Dasmariñas, Dasmariñas City, Cavite.

**CONFORME:**

\_\_\_\_\_  
Applicant Signature over Printed Name

\_\_\_\_\_  
Parent's Signature over Printed Name