



# Colegio de San Juan de Letran Calamba

Group No. \_\_\_\_\_

City of Calamba, Laguna, Philippines 4027 • [www.lettran-calamba.edu.ph](http://www.lettran-calamba.edu.ph) • +63(049)-5455453

## Research Department

### Student Research Topic/Title Changing Form after Proposal Defense

Name of Student/s: \_\_\_\_\_

This is to request change of topic/revision of title:

From	To	Reason/s
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

#### Recommended by:

\_\_\_\_\_  
Panelist 1  
(signature over printed name)

\_\_\_\_\_  
Panelist 2  
(signature over printed name)

\_\_\_\_\_  
Panelist 3  
(signature over printed name)

#### Noted by:

#### Approved by:

\_\_\_\_\_  
Research Adviser/Date  
(signature over printed name)

\_\_\_\_\_  
Research Moderator/Date  
(signature over printed name)

\_\_\_\_\_  
Academic Head/Date  
(signature over printed name)

\_\_\_\_\_  
RD Director/Date  
(signature over printed name)



1<sup>st</sup> Floor, De Las Casas Building • [ard@lettran-calamba.edu.ph](mailto:ard@lettran-calamba.edu.ph) • Trunkline: 049-545-5453 loc (3002/5021/2092)



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