



# UP BIOLOGY

Institute of Biology, College of Science  
University of the Philippines  
Diliman, Quezon City 1101 Philippines



Telephone (632) 981-8500 loc. 3727  
Telefax (632) 920-5471

Email: upbiologydiliman@yahoo.com  
upbiology@up.edu.ph  
Website: biology.upd.edu.ph

## CERTIFICATE OF ACCEPTANCE

\_\_\_\_\_ Semester, SY 20\_\_\_\_ - 20\_\_\_\_\_.

This is to certify that I am officially accepting \_\_\_\_\_ whose signature appears below, as my thesis advisee in \_\_\_\_\_ (*Specific Area*).

I also certify that I have read and understood the Undergraduate Thesis Guidelines of the Institute of Biology.

\_\_\_\_\_  
Name & Signature of Adviser

\_\_\_\_\_  
Date

### Conforme

I hereby agree to comply with the Undergraduate Thesis Guidelines of the Institute of Biology.

\_\_\_\_\_  
Name & Signature of Student

\_\_\_\_\_  
Date