

OFFICE OF THE UNIVERSITY REGISTRAR

DateSignature

1/F Administration Building
Visca, Baybay City, Leyte, 6521-A PHILIPPINES
Telefax: +63 53 563 7067 or 5650600; Local 1010
Email: registrar@vsu.edu.ph
Website: www.vsu.edu.ph

Posted in:

REPORT OF GRADE COMPLETION

Date Amount P				Grade She Form 19 _ Computer		
Date Issued	:	Valid	l Until:	Issue	ed by:	
Incomplete	O	021-2022 - First S				
Course No.	and Descriptive Title: AGEC			TUDAL MAD	WETING	Unit: <u>3</u>
College (whe	ere subjects belong) : <u>Colleg</u>	ne of Manageme	nt and Economics	nt/Division:	= Opt. Of LO	OHOHIUS
Stud. No.			-		Grade	
	Name of Student (Note: Good only.)	for one student	Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
Stud. No.	Name of Student (Note: Good only.) Family Name First Name	I for one student Middle Name	-	Course No./	Upon	Remarks
	Name of Student (Note: Good only.) Family Name First Name PAGASPAS, MICHELLE CA	I for one student Middle Name	-	Course No./	Upon	Remarks

OP#