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## OFFICE OF THE UNIVERSITY REGISTRAR

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## REPORT OF GRADE COMPLETION

Data				Posted in: Stud. Perm Rec Grade Sheet Form 19 Computer	<u>Date</u> <u>Signa</u>	
Date Issued	:	Valid Until:		Issued by: _		
Incomplete G	Grades Obtained :					
Course No. and Descriptive Title:						
Name of Professor :		Department/Division:				
College (whe	re subjects belong) :					
Stud. No.	. No. Name of Student (Note: Good for one student only.)		Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
	Family Name Fi	rst Name Middle Name		·	·	
Submitted by	<del>;</del>	Approved :		Received by:		
Instructor/Professor's Signature Over Printed Name Date:		Department Head Signature Over Printed Name Date:		Registrar's Office Signature Over Printed Name Date:		