

UNIVERSITY REGISTRAR

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Form 19

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Grade Sheet

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Date Signature

REPORT OF GRADE COMPLETION

Date Issued	: <u>05-8-25</u> Valid Until: <u>Summer 2024-2025</u> Issu	ed by:	
Incomplete Grades Obtained	:Summer 2023-2024		
Course No. and Descriptive Til	tle: Practicum - Skills Development	Unit:	6
Name of Professor	: Michelle Aubrey D. Cabase	Department/	Division: 10€
College (where subjects belong)	: pepartment of Economics		

Stud. No.	Name of Student (No	ote: Good for one st	udent only.)	Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
21-1-01076	Family Name	First Name Maribelle	Middle Name	B\$42	Summer Pradium	2.75	PACCED
Submitted b	macabased	Approved:	m		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:		

Vision:

Mission:

O.R.#

Date

712640

Amount ₱ 100.00

05-15-25

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