

## OFFICE OF THE UNIVERSITY REGISTRAR

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Date Signature

## REPORT OF GRADE COMPLETION

O.R.# Date Amount ₱		Posted in Stud. Per Grade Sh Form 19 Compute	m Rec		
Date Issued	: April 29, 2022 Valid Until:		Issued by: _		
Incomplete Grades Obtained	2 <sup>nd</sup> Semester, A.Y. 2020-2021				
Course No. and Descriptive	Title: PhEd14 - Physical Activities to	wards Heal	th and Fitne	ess 2 Unit:	2
Name of Professor:	RUBIE JANE M. BATIS	epartment/Di	ivision: IHK		
College (where subjects belong)	: COLLEGE OF EDUCATION				
Stud. No. Name of S	tudent (Note: Good for one student only.)	Course & Year	Course No./ Subject	Grade Upon Completion	Remarks

Stud. No.	Name of Student (Note: Good for one student only.)			Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
19-1-02561	Family Name TUBO,	First Name JOHN PHILIP	Middle Name	BPEd - 2	PhEd-14	2.00	PASSED
Submitted b	Ol	Approve	CHARIS B. LIMBO	0	Received b	y:	
Instructor/Professor's Signature Over Printed Name Date: April 29, 2022		Sigr	Department Head Signature Over Printed Name Date:		Registrar's Office Signature Over Printed Name Date:		

Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head