



## REPORT OF GRADE COMPLETION

O.R.# \_\_\_\_\_  
Date \_\_\_\_\_  
Amount P \_\_\_\_\_

	Date	Signature
Posted in:		
Stud. Perm Rec	_____	_____
Grade Sheet	_____	_____
Form 19	_____	_____
Computer	_____	_____



Date Issued : 30 AUG 2022 Valid Until: \_\_\_\_\_ Issued by: \_\_\_\_\_

Incomplete Grades Obtained : SY 2021-22 2<sup>nd</sup> Semester

Course No. and Descriptive Title: AgSc 11 Introduction to Agriculture Unit: 1 unit

Name of Professor : Luz G. Asio Department/Division: Agronomy

College (where subjects belong) : College of Agriculture and Food Science

Stud. No.	Name of Student (Note: Good for one student only.)			Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
21-1-01479	Family Name RICO	First Name JAELENN ROTH	Middle Name NOYA	BSDC 1	AgSc 11	2.00	passed
<b>Submitted by:</b>  <b>LUZ G. ASIO</b> Instructor/Professor's Signature Over Printed Name Date: <u>30 Aug 22</u>				<b>Approved:</b>  <b>RUTH O. ESCASINAS</b> Department Head Signature Over Printed Name Date: <u>31 Aug. 2022</u>		<b>Received by:</b>  _____ Registrar's Office Signature Over Printed Name Date: _____	
Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head							



## REPORT OF GRADE COMPLETION

O.R.#	_____
Date	_____
Amount P	_____

	Date	Signature
Posted in:		
Stud. Perm Rec	_____	_____
Grade Sheet	_____	_____
Form 19	_____	_____
Computer	_____	_____

Date Issued	: 30 AUG 2022	Valid Until: _____	Issued by: _____
Incomplete Grades Obtained	: SY 2021-22 2 <sup>nd</sup> Semester		
Course No. and Descriptive Title:	AgSc 11 Introduction to Agriculture		Unit: 1 unit
Name of Professor	: Luz G. Asio	Department/Division:	Agronomy
College (where subjects belong)	: College of Agriculture and Food Science		

Stud. No.	Name of Student (Note: Good for one student only.)			Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
	Family Name	First Name	Middle Name				
21-1-02355	BANZON	ZHYRA	LOM-OC	BSDC 1	AgSc 11	2.50	passed
Submitted by:				Approved:		Received by:	
<u>LUZ G. ASIO</u> Instructor/Professor's Signature Over Printed Name Date: 30 Aug 22				<u>RUTH O. ESCASINAS</u> Department Head Signature Over Printed Name Date: 31 Aug 22		Registrar's Office Signature Over Printed Name Date: _____	
Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head							