





DEPARTMENT OF AGRONOMY

DASS Building, Visayas State University
Visca, Baybay City, Leyte PHILIPPINES 6521-A
Phone: +63 565 0600 Local 1013
Email: agronomy@vsu.edu.ph
Website: www.ysu.edu.ph

	PERMIT TO GIVE EXAMINATION/HOLD CLASS
OUTSIDE OF REGULAR CLASS SCHEDULE	ĔŖ
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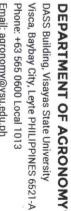
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Wame and Signature of Department Head	70	Certified True and Correct: Maneaula Correct:
s):	If changed, state reason(s):	
	Venue:	
Time :	Changed schedule: Date:	[] Changed schedule:
class was conducted on:	This is to certify that the above examination/make-up class was conducted on:	This is to certify that the
	CERTIFICATION	to be accomplished after the examination/class was conducted
		A Pontago III I I I I I I I I I I I I I I I I I
Date:	Date:	Date:
College Dean	Dean of Students	Department Head
Approved:	Noted:	Recommending Approval:
Maried the Printed Name of Faculty	Signal	Signal
by all students concerned and nnot take the exam/attend the	I hereby certify that the above schedule is agreed upon by all students concerned and it with ay calendared University activity. Students who cannot take the exam/attend the	I hereby certify that the above schedule is agreed upon by all students concerned and not in conflict with ay calendared University activity. Students who cannot take the exam/attend the Class due to justifiable reason agreed to make the property of the control
belong to different sections.	[/] Exam in departmental and students taking the exam belong to different sections [] Regular meeting day has declared a holiday [] other (<i>please specify</i>)	[\(\sigma\) Exam in departmental [\(\sigma\) Regular meeting day I [\(\sigma\) other (please specify)
sa"		for the following reasons:
107-107	Ochber 00,1013/1:00-3:00pmat the (venue) 0A -	(date and time) Ochwr 00,1013/1:
[] conduct class outside of the regular schedule to		May I request to [√] hold exam
chedule: see affectived	y Regular Class Schedule:	[] Lecture [√] Laboratory
Fundamentals of Emp Production		Course Number: ham 11 Semester 11st 2nd
SCHEDULE	DE OF REGULAR CLASS SCHEDULE	COLSIDE

^{*} to be accomplished in 3 copies









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Certified True and Correct: to be accomplished after the examination/class was conducted Date not in conflict with ay calendared University activity. Students who cannot take the exam/attend the Class due to justifiable reason agreed to make up at a convenient time. Recommending Approval: for the following reasons: (date and time) /chbrr 00, /01/0/8:00 - 4:00 pmat the (venue) Semester Course Number:] Lecture Name Department Head May I request to [√] hold exam This is to certify that the above examination/make-up class was conducted on: I hereby certify that the above schedule is agreed upon by all students concerned and] other (please specify) Exam in departmental and students taking the exam belong to different sections Regular meeting day has declared a holiday and Signature of Faculty] date(s), time, and venue stated above] Changed schedule: [] Laboratory PERMIT TO GIVE EXAMINATION/HOLD CLASS **OUTSIDE OF REGULAR CLASS SCHEDULE** DELA Nnd PENA Date: Noted If changed, state reason(s): Venue: Date: CERTIFICATION Dean of Students [] conduct class outside of the regular schedule to Regular Class Schedule: Course Title: Year: Academic Name and Signature of Department Head は大大で Signature over Printed Name of Faculty 106-40 principlay 6 Ime Date Approved: 3 see affactive BANDO College Dean moduction

Date:

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Date: Ichor

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