



VSUEE VIRTUAL CLASSROOM CREATION REQUEST FORM

Date: 02.17.22

☐ Creation ☒ Update

Department	Liberal Arts and Behavioral Sciences
College	College of Arts and Sciences
Campus	Main Campus

FOR CREATION

Course Information

Course Category	
Degree Program	
Major	
Course Code	
Course Title	
Semester	
Academic Year	
No. of Virtual Classrooms	

Faculty

VC#	Offering Number/s	Last Name	First Name	VSU Official Google Account (@vsu.edu.ph)	Signature

FOR UPDATE

VC Information

Course Category	
Degree Program	
Major	
Complete VC Title	<u>VSU 16 LIFE AND WORKS OF KIZAL</u>

Faculty

Last Name	First Name	VSU Official Google Account (@vsu.edu.ph)	Signature
<u>LARRABAL</u> <u>GONZALES</u>	<u>ALAINA</u> <u>GENOVIA</u>	<u>alaina.larrabal@vsu.edu.ph</u> <u>genovia.gonzalez@vsu.edu.ph</u>	<u>[Signature]</u>