

OFFICE OF THE UNIVERSITY REGISTRAR

Date Signature

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Email: registrar@vsu.edu.ph Website: www.vsu.edu.ph

REPORT OF GRADE COMPLETION

O.R.# Date Amount P		S G F	osted in: tud. Perm Rec trade Sheet orm 19 omputer		
	. Ми 19 2023 Valid Until:				
Incomplete Grades Obtained Course No. and Descriptive Title. Name of Professor	Koro 215e - Cyglid RO ESCHINITS OGS (CHTS)	Field	Cury Phys	is begit:3 Division:0	3.0V
		Course	Course No./	Grade Upon	
	ent (Note: Good for one student only.)	& Year	Subject	Completion	Remarks
21-1-01969 Fo-ol	First Name Middle Name Mgria Coze Coze	Maglew	1510215	1-75	Passed
Submitted by: Moran MITH O. BECKSINA	Approved: DIO NESID M. BAÑOC	<u> </u>	Received by:		
Instructor/Professor's Department Head			Registrar's Office		

Signature Over Printed Name

Date:

Signature Over Printed Name

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

Date: 6/2/23

Signature Over Printed Name

Date:

NO. DX-REG - 23-448