

## OFFICE OF THE UNIVERSITY REGISTRAR

Date Signature

1/F Administration Building Visca, Baybay City, Leyte, 6521-A PHILIPPINES Telefax: +63 53 563 7067 or 565 0600; Local 1010

Posted in:

Received by:

Registrar's Office

Signature Over Printed Name

Date: \_

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

## REPORT OF GRADE COMPLETION

O.R.# Date					Grade Sheet Form 19		
Amount ₱					Computer		
				ı			
Date Issued		: Valid Until: Issued by:					
Incomplete Gra	ades Obtained	: 2 <sup>nd</sup> SEMES	STER SY 2020-2	021			
Course No. and	d Descriptive 7	itle: PhEd 140 I	Research Uni	t: <u>3</u>			
Name of Profe	ssor	: Charis Lim	bo Departmer	nt/Division: IHK			
College (where	subjects belong)	: COLLEGE	OF EDUCATION	N			
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				
18-1-01496	CADIZ	JUNIELYN	PONTEROS	BPED 3	PHED 140	3.0	Passed

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

Instructor/Professor's

Signature Over Printed Name

Submitted by:

Approved by:

Date:

**BAYRON \$. BARREDO** 

Department Head

Signature Over Printed Name