

OFFICE OF THE UNIVERSITY REGISTRAR

Date

Signature

1/F Administration Building Visca, Baybay City, Leyte, 6521-A PHILIPPINES Telefax: +63 53 563 7067 or 563 7428; Local 1010

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

REPORT OF GRADE COMPLETION

			Posted in:				
			Stud. Perm	Rec		-	
O.R.#			Grade Shee	et		_	
Date		Form 19				_	
Amount P		Computer				_	
8							
Date Issued		Valid Until:		Issued by:			
	ades Obtained :						
Course No. and Descriptive Title:					Unit:	3	
Name of Professor :		MARC DENVER GONZAGA	A Departn	Department/Division:		CWTS	
College (where	subjects belong):						
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 Na	ame				
20-1-00907	LLANO	JOVANI		NSTP 11c	2.25	Passed	
Submitted by:		Approved:		Received by:			
11/	765	1					
MARC DEN	VER GONZAGA	JOY A. BELLEN					
Instructor/Professor's		Department Head		Registrar's Office			
Signature Over Printed Name		Signature Over Printed Na	Signature Over Printed Name				
Date:		Date:	Date	e:			
Distribution of App	roved Copy: 1 Registral	r. 1 Student, 1 Dept. Head					

Vision:

Mission:

Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.

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