

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

## OFFICE OF THE UNIVERSITY REGISTRAR

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

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

## REPORT OF GRADE COMPLETION

O.R.# Date Amount P			1	Posted in: Stud. Perm Rec Grade Sheet Form 19 Computer	Date Signa	
	Grades Obtained : Fi		2022			
Name of Pro		Arts and Science		Departmen	t/Division: <u>D</u>	oPAC
Stud. No.	Name of Student (No	ote: Good for one student only.)	Course & Year	Course No./ Subject	Grade Upon	Remarks
Stud. No.	Family Name I	ote: Good for one student only.)  First Name Middle Name  EPARDZ BORRES		Subject	The state of the s	Remarks Passed

Vision: Mission: A globally competitive university for science, technology, and environmental conservation. Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment. Page 1 of 1 FM-REG-20 v1 06-30-2020