

OFFICE OF THE UNIVERSITY REGISTRAR

Date Signature

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REPORT OF GRADE COMPLETION

O.R.# Date Amount P				St G Fo	osted in: ud. Perm Rec rade Sheet orm 19 omputer			
Date Issued : MARCH 4, 7027 Valid Until:					Issued by:			
Incomplete G	rades Obtained	: 2nd Semes t	TERGENCY PREPA	21				
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Course No. a	nd Descriptive 11	tie: Thea (30 - P	IND SAFETY MA	NAGEM	6 N I	Onit	,	
Name of Prof	essor	: CIEDERIE HO	INEY LOW DIMALIG	- GAPAS	N Department/	Division:/\mathcal{N}	URSING	
College (when	e subjects helona)	· INSTITUT	OF HUMAN KIN	ETICS				
College (When	e subjects belong)		OF DUTIESTO PAR	10 1102	· · · · · · · · · · · · · · · · · · ·			
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Stud. No.	Name of Student (Note: Good for one student only.)			& Year	Course No./ Subject	Grade Upon Completion	Remarks	
18-1-01779	Family Name VARRON	First Name JESREL	Middle Name	BPED	Pred 130	2.25	PASSED	
Submitted by: Approx			ved :			Received by:		
	290 20	2007.55	O i					

Department Head

Signature Over Printed Name

Date: 😏

Vision: Mission:

CIEDELLE HONEY LOUDINALIG-GAPASIA

Instructor/Professor's

Signature Over Printed Name

Date: 3/4/22

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Registrar's Office

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