INSTRUCTIONS:

Please use BLUE ballpen.

Please AVOID erasures.

If erasure cannot be avoided, please DO NOT use correction tape/fluid in erasing. Just strikethrough the text and write the correct text on top and countersigned by the one making the erasure as shown in the image below:

graduate show

O.R.# <u>0707416</u> Date <u>02-04-2025</u> Amount ₱ <u>100.00</u>

UNIVERSITY REGISTRAR

1/F Administration Building Visca, Baybay City, Leyte Telefax: +63 53 563 7067; +63 53 565 0600 local 1010 Email:registrar@vsu.edu.ph Website: www.vsu.edu.ph

DE COMPLETION

	Date Signature
Posted in:	
Stud. Perm Rec	
Grade Sheet	
Form 19	
Computer	

		200 %
Date Issued	: 02-04-2025 Valid Until: <u>Summer 2024-2025</u>	Issued by:
ncomplete Grades Obtained	: <u>Summer 2023-2024</u>	<i>U</i>
Course No. and Descriptive Tit	le: PRACTICUM - SKILLS DEVELOPINENT	Unit:
Name of Professor	: MICHELLE AUBREY D. CABAGE	Department/Division: _EVO no mucr
College (where subjects belong)	COULEGE OF AGRICULTURE AND FOOD	SCIENCE

Stud. No.	Name of Student (Note: Good for one student only.)			& Year	Course No./ Subject	Grade Upon Completion	Remarks
23-1-01944	Family Name First Na POLICUM PENAIS		Middle Name	BIA-2	PRACTICUM -	2.75	PASCED
	macabased		oved:	_	Received by:		
Instructor/Professor's Signature Over Printed Name Date:			Department Head Signature Over Printed Name Date:		Registrar's Office Signature Over Printed Name Date:		