

OFFICE OF THE UNIVERSITY REGISTRAR

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Posted in:

Date Signature

REPORT OF GRADE COMPLETION

O.R.# Date						Stud. Perm Rec Grade Sheet Form 19 Computer				
Amount P					Comparer					
Date Issued : NC				OVEMBER 25, 2021 Valid Until:			Issued by:			
1	ncomplete Gra	ades Obtained	:	SECON	ECOND SEMESTER SY 2020-2021					
(Course No. and	d Descriptive Tit	le: <u>Litr. 1</u>	35 (C	35 (Creative Writing) Unit:3					
Name of Professor : PAULA NADREA M. PAQUIBULAN Department/Division: DLABS										
College :COLLEGE OF ARTS AND SCIENCES										
Stud. No. Name of Student (Note: Good for one student only.) Course & Course No./ Grade Upon										
						Year	Subject	Completion	Remarks	
		Family Name	First Na	me	Middle Name					
	19-1-01973	SUAN	TRAC PAUL		PERITO	BSDC 2	Litr.135/ M697	1.50	PASSED	
	Submitted by:			Approved:			Received by:			
JACK .										
	PAULA NADREA M PAQUIBULAN				JETT C. QUEBE	Do nighter do Office				
	Instructor/Professor's Signature Over Printed Name				Department gnature Over Pri	Registrar's Office Signature Over Printed Name				
	Date: December 3, 2021				Date:	Date:				

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