

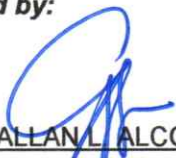



REPORT OF GRADE COMPLETION

O.R.# _____
Date _____
Amount ₱ _____

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

Date Issued : Nov. 18, 2023 Valid Until: 1st Sem. SY: 2023-2024 Issued by: _____
Incomplete Grades Obtained : 1st Sem SY: 2022-2023
Course No. and Descriptive Title: AGRO212 Field Crop Production and Management Unit: 3
Name of Professor : ED ALLAN L. ALCOBER Department/Division: AGRONOMY
College (where subjects belong) : COLLEGE OF AGRICULTURE AND FOOD SCIENCE (CAFS)

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 Name				
21-1-01941	MAHAGUAY	LADY DIANA	RUPISAN	MS2	AGRO212	2.50	Passed
Submitted by:				Approved :		Received by:	
 ED ALLAN L. ALCOBER Instructor/Professor's Signature Over Printed Name Date: <u>11/18/23</u>				 DIONESIO M. BAÑOC Department Head Signature Over Printed Name Date: _____		_____ Registrar's Office Signature Over Printed Name Date: _____	
Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head							





REPORT OF GRADE COMPLETION

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Stud. Perm Rec	_____	_____
Grade Sheet	_____	_____
Form 19	_____	_____
Computer	_____	_____

Date Issued : Nov. 18, 2023 Valid Until: 1st Sem. SY: 2023-2024 Issued by: _____
Incomplete Grades Obtained : 1st Sem SY: 2022-2023
Course No. and Descriptive Title: CpSc21 Principles of Crop Production Unit: 3
Name of Professor : ED ALLAN L. ALCOBER Department/Division: AGRONOMY
College (where subjects belong) : COLLEGE OF AGRICULTURE AND FOOD SCIENCE (CAFS)

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 Name				
20-1-01192	CASTILLON	JOSIE ANN	JUMAWAN	BSA-	CpSc21	2.75	Passed
Submitted by:				Approved :		Received by:	
 ED ALLAN L. ALCOBER Instructor/Professor's Signature Over Printed Name Date: <u>11/18/23</u>				 DIONESIO M. BAÑOC Department Head Signature Over Printed Name Date: <u>11/20/23</u>		_____ Registrar's Office Signature Over Printed Name Date: _____	
Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head							