



REPORT OF GRADE COMPLETION

O.R.# _____
Date _____
Amount P _____

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


Date Issued : _____ Valid Until: _____ Issued by: _____

Incomplete Grades Obtained : 2nd semester 2020-2021

Course No. and Descriptive Title: NSTP 12C-CIVIC WELFARE TRAINING SERVICE Unit: 3

Name of Professor : Precious C. Domingo Department/Division: DLABS

College : _____

Stud. No.	Name of Student (Note: Good for one student only.)			Course & Year	Course No./ Subject	Grade Upon Completion	Remarks
20-1-0084	Family Name LUNA	First Name SHAIRA	Middle M		NSTP 12-C CWTS	2.75	Passed
Submitted by:  <u>PRECIOUS C. DOMINGO</u> Instructor/Professor's Signature Over Printed Name Date: <u>FEBRUARY 15, 2022</u>		Approved : <u>JOY A. BELLEN</u> Department Head Signature Over Printed Name Date: _____			Received by: _____ Registrar's Office Signature Over Printed Name Date: _____		
Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head							