

UNIVERSITY REGISTRAR

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Form 19

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Grade Sheet

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Date Signature

REPORT OF GRADE COMPLETION

Date Issued	1	Novu, was	Valid Until: <u>1st Se</u>	m. SY: 2	023-2024 lesu	ed by:	
Incomplete	Grades Obtained	:1st Sem_S			020 2024 1330	ed by.	
Course No.	and Descriptive T	itte: Fundamabal		1		Unit:	-
Name of Pro	ofessor		lanes-Maraña	n	Departmen	nt/Division:	
College (whe	re subjects belong)	CKFS					
							0
Stud. No.	Name of Stu	dant (Note: Cond for		Course	Course No./	Constalla	
	Name of Student (Note: Good for one student only.)			& Year	Subject	Grade Upon Completion	Remarks
22-1-03084	Family Name	First Name	Middle Name		Agro U	3.60	PASSED

Department Head

Signature Over Printed Name

Date:

Vision: Mission:

O.R.#

Date

Amount P

Submitted by:

Instructor/Professor's

Signature Over Printed Name

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

Date:

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A globally competitive university for science, technology, and environmental conservation. Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.

Approved:

Page 1 of 1 FM-REG-20 v1 06-30-2020