

065 38 42

May 18, 2023

Instructor/Professor's

Signature Over Printed Name Date: 1/19/23

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

O.R.#

Amount ₱ 25.00

Date





DEPARTMENT OF AGRONOMY

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Date Signature

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Posted in: Stud. Perm Rec

Form 19 Computer

Grade Sheet

REPORT OF GRADE COMPLETION

		`					
Date Issued : Na		May 18, 2023 Valid Until:	2023 Valid Until: Issued by: 200				
Incomplete Gra	ades Obtained :	2 rd fem 2021-2022					
Course No. and	d Descriptive Title:	AGRO 215e - Applies	Field Cer	of Physiology	Unit: 3.7	00	
Name of Profes	ssor :	RO ESCHANK, Ph.D.	l	Department/L		1.00	
College (where	subjects belong) :	(CAFS), 068 mc					
Stud. No. Name of Student (Note: Good for one student only.) Course & Year			Course No./ Subject	Grade Upon Completion	Remarks		
18-2-00020	Family Name CORTES	First Name Middle I	+ Harry	AGRODISE	2.00	Passed	
Submitted by:		Approved:			Received by:		
	AMIN	Alexander					
DIA	THO BUKIN	RUTH O ESCA	SINAS				

Department Head

Signature Over Printed Name

Registrar's Office

Signature Over Printed Name

Date: