



REPORT OF GRADE COMPLETION

O.R.# _____
Date _____
Amount P _____

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

Date Issued : JULY 15, 2022 Valid Until: _____ Issued by: _____

Incomplete Grades Obtained : 2nd SEMESTER, SY 2020- 2021

Course No. and Descriptive Title: NSTP 12c - CIVIC WELFARE TRAINING SERVICE (CWTS) Unit: 3

Name of Professor : LOREME S. CAGANDE Department/Division: AGRONOMY

College (where subjects belong) : N/A

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				
20-1-00231	MASBAD	LAILA	REGACION	BSAB 1	NSTP 12c	1.00	PASSED

Submitted by: <u>L. L. Cagande</u> LOREME S. CAGANDE Instructor/Professor's Signature Over Printed Name Date: <u>7/15/2022</u>	Approved by: <u>JOY A. BELLEN</u> JOY A. BELLEN Department Head Signature Over Printed Name Date: _____	Received by: _____ Registrar's Office Signature Over Printed Name Date: _____
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Distribution of Approved Copy: 1 Registrar, 1 Student, 1 Dept. Head