

OFFICE OF THE UNIVERSITY REGISTRAR

Date Signature

1/F Administration Building Visca, Baybay City, Leyte, 6521-A PHILIPPINES Telefax: +63 53 563 7067 or 563 7428; Local 1010

Posted in:

Email: registrar@vsu.edu.ph Website: www.vsu.edu.ph

REPORT OF GRADE COMPLETION

O.R.# Date Amount P				0	Stud. Perm Rec Grade Sheet Form 19 Computer		
Date Issued		;	Valid Until: Issued by:				
Incomplete Gr	ades Obtained	: 2ND REA, SY	2020 - 2024				
Course No. an	nd Descriptive Title nit: <u>3.0</u>	e: PhEd 136 - DRUG	EDUCATION, CONS	SUMER HE	ALTH EDUCATION	ON AND HEALT	THY
Name of Profe	essor	: CHRISTIAN VIE	P. BALDONADO	Depa	artment/Division.	CON	
College (where	subjects belong)	: COLLEGE OF EL	DUCATION	,		5.	
Stud. No.	Name of Student (Note: Good for one student only.)			e & Year	Course No./ Subject	Grade Upon Completion	Remarks
18-1-01996	Family Name	First Name	Middle Name	OPED 3	W125 PHED 136	2.50	PAMED
Submitted by:		Approve	Approved:		Received by:		
Insti Signatur	AN VIE P. BALDO ructor/Professor's re Over Printed Nam te: 124 22		Department Head Signature Over Printed Name Date:		Registrar's Office Signature Over Printed Name Date:		
Distribution of A	oproved Copy: 1 Reais	strar. 1 Student. 1 Dept.	Head				

Vision: Mission: Page 1 of 1 FM-REG-20 v1 06-30-2020

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