



University of the Philippines
Los Baños
REPORT OF GRADE FOR COMPLETION or REMOVAL

Name: Student Number:
Degree Program: College:
Course Code: Units: Term: 1S 2S MY
Course Title: Academic Year:

Table with 3 columns: Original Grade, Completion/Removal Grade, Date of Completion

Name & Signature of Instructor Date Name & Signature of Dept/Unit Chair Date



University of the Philippines
Los Baños
REPORT OF GRADE FOR COMPLETION or REMOVAL

Name: Student Number:
Degree Program: College:
Course Code: Units: Term: 1S 2S MY
Course Title: Academic Year:

Table with 3 columns: Original Grade, Completion/Removal Grade, Date of Completion

Name & Signature of Instructor Date Name & Signature of Dept/Unit Chair Date



University of the Philippines
Los Baños
REPORT OF GRADE FOR COMPLETION or REMOVAL

Name: Student Number:
Degree Program: College:
Course Code: Units: Term: 1S 2S MY
Course Title: Academic Year:

Table with 3 columns: Original Grade, Completion/Removal Grade, Date of Completion

Name & Signature of Instructor Date Name & Signature of Dept/Unit Chair Date