



GRADUATE SCHOOL  
**UNIVERSITY OF THE PHILIPPINES LOS BAÑOS**

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### CERTIFICATE OF SATISFACTION OF PREREQUISITE

This is to certify that \_\_\_\_\_  
Surname First Name Middle Name

Has satisfied the pre-requisite as follows:

Higher Course Course No. and Title	Pre-requisite(s) Course No. and Title	Course Equivalent to Pre-requisite Course No. and Title

Equivalent course taken at \_\_\_\_\_

During \_\_\_\_\_ semester/term \_\_\_\_\_ with grade of \_\_\_\_\_

\_\_\_\_\_  
Department Chair  
(Signature over printed name)  
Date: \_\_\_\_\_