



## 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: \_\_\_\_\_

Original Grade	Completion/Removal Grade	Date of Completion

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