UP Form 13C



## 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	7 [	Completion/Ren	noval Grade	Date of Completion	
Oliginal Oliuc		completion, item	novar Grave	Dute of Completion	
Name & Signature of Instructor		Date	Name & Signature of Dept/Unit Chair		air Date