



UNIVERSITY OF THE PHILIPPINES MINDANAO REPORT OF GRADE FOR COMPLETION or REMOVAL

Name: Degree Program: Course Number: Course Title:

Student Number: College: Units: Term: Academic Year:

Original Grade: 4.0 INC

Completion/Removal Grade: 1.0 1.25 1.50 1.75 2.0 2.25 2.50 2.75 3.0 4.0 5.0 P F

Date of Completion or Removal:

Name and Signature of Instructor

Date

Name and Signature of Department Chair

Date



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