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		Issue No.	01
		Revision No.	00
		Date	07292019
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VRE-UES	MONITORING AND EVALUATION FORM FOR EXTENSION PROJECTS (OUT-CAMPUS PROJECTS)	QAC No.	CC-07292019

Date: _____
Time: _____

Name of Cooperator/Clientele: _____

Location: _____

Project: _____

Reason for Visiting: () Regular/Periodic Monitoring () Emergency Monitoring
 () Tour, Field Day, etc. () Others: _____

Present Status of the Project:

Problems Encountered:

Action to be Taken:

Observations/Comments:

Suggestions/Recommendations:

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Noted by:

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Transaction ID	
Signature	