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Form 3C



Republic of the Philippines

CAVITE STATE UNIVERSITY

Bacoor City Campus

Office of the Registrar

**REPORT OF COMPLETION**

**The Campus Registrar**

CvSU –Bacoor City Campus

Sir:

Please be informed that Mr./Miss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Student No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_) a student in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has removed the grade of “4.00” or “INC” completed the requirements for the grades of “Incomplete” on the subjects indicated below.

Subject Previous Grade Semester/A.Y. Taken Final Grade

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Name and Signature of Instructor

Recommending Approval:

**JIMWELL G. DACANAY**

*Campus Registrar*

Approved:

**PROF. MENVYLUZ S. MACALALAD**

Campus Administrator

*(To be prepared in three copies: the original copy for the Registrar, the duplicate for the Office of the Dean, the triplicate for the student)*