



454 GRC Bldg, Rizal Ave. Ext. Corner 9th Ave.  
Grace Park, Caloocan City

GRC FORM NO. 11

COMPLETION FORM

Student Name: \_\_\_\_\_  
Course & Major: \_\_\_\_\_  
Student Number: \_\_\_\_\_ Date of Completion: \_\_\_\_\_

Subject	Units	When Taken	Instructor	Grade Upon Completion	Remarks
		AY _____ _____ Sem			

\_\_\_\_\_  
Signature over Printed Name of  
Faculty In-Charge

Noted:

\_\_\_\_\_  
Program Head/Dean

Received:

\_\_\_\_\_  
Registrar’s Office

Notes:

- \* Prepare in two copies: Copy for Registrar and Copy for Student
- \*It must be graded and signed by the faculty-in-charge
- \*It must also be signed by the Program Head/Dean
- \* Pay to the Cashier and attach the O.R in this form
- \*Submit the two copies of this form w/ O.R to the Registrar’s Office (must be signed by the Registrar)



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