

University of the Philippines
PERMIT FOR COMPLETION / REMOVAL EXAMINATION
College of Science

Student No : _____ Date : _____

Mr/Ms _____ is hereby permitted to submit completion requirements / take
(Printed Name)
removal examination in _____ incurred in the ____ Semester, 20 ____ - 20 ____
(Subject)

Fee : _____ O.R # _____ Date of Payment : _____

APPROVED : _____

EIZADORA T. YU, Ph.D.

Associate Dean for Mentoring Academic Progress and Advancement

Date of Examination / Completion : _____ by : _____
(Instructor's Signature over Printed Name)

Note : No removal examination/completion in INC shall be given without this permit duly approved.
Removal of the "Inc" must be done within the prescribed time within one (1) academic year.

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