



ISSUE STATUS	REV. NO.	EFFECTIVE DATE	PAGE NO.
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DOCUMENT CODE NUMBER
FM -DSSC- CAP-001

COLLEGE OF _____

FACULTY LOADING

Semester, S.Y. _____

Program: _____

Faculty 1: Name of faculty – Highest Educational Attainment

Course No.	Descriptive Title	Faculty Credits	Hours		Units	Year/Course/Section	Lecture Schedule		Laboratory Schedule		Room
			Lec	Lab			Day	Time	Day	Time	
Total		0	0	0	0						

Faculty 2: Name of faculty – Highest Educational Attainment

Course No.	Descriptive Title	Faculty Credits	Hours		Units	Year/Course/Section	Lecture Schedule		Laboratory Schedule		Room
			Lec	Lab			Day	Time	Day	Time	
Designation	Designation Title										
Total		0	0	0	0						

Faculty 3: Name of faculty – Highest Educational Attainment

Course No.	Descriptive Title	Faculty Credits	Hours		Units	Year/Course/Section	Lecture Schedule		Laboratory Schedule		Room
			Lec	Lab			Day	Time	Day	Time	



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Program: _____

Faculty 1: Name of faculty – Highest Educational Attainment

Course No.	Descriptive Title	Faculty Credits	Hours		Units	Year/Course/Section	Lecture Schedule		Laboratory Schedule		Room
			Lec	Lab			Day	Time	Day	Time	
	Total	0	0	0	0						

Faculty 2: Name of faculty – Highest Educational Attainment

Course No.	Descriptive Title	Faculty Credits	Hours		Units	Year/Course/Section	Lecture Schedule		Laboratory Schedule		Room
			Lec	Lab			Day	Time	Day	Time	
Designation	Designation Title										
	Total	0	0	0	0						



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