VISAYAS STATE UNIVERSITY

GRADUATE EDUCATION

RESULT OF DEPARTMENTAL EVALUATION ON THE ACADEMIC PERFORMANCE OF THE GRADUATE STUDENT

DEPARTMENT OF _____

Name of Graduate Student_____

Degree Sought _____

Minor/Cognate _____

Recommendation:

[ ] Retention in the Graduate Education

Reason (s):

[ ] Dismissal from the Graduate Education

Reason (s):

[} Others

Reason (s):

NAMES AND SIGNATURES OF RECOMMENDING OFFICIALS

GRADUATE ADVISORY COMMITTEE _____

_____

_____

_____

DEPARTMENT HEAD _____

APPROVED:

_____
Director, Graduate Education
Date signed:_____

*** Indicate N/A or NONE for fields not applicable**

GRADUATE EDUCATION
Visayas State University PQWW+JQ Baybay City, Leyte
Email: gs@vsu.edu.ph
Website: www.vsu.edu.ph/gs
Phone: +63 53 565 0600 Local 1062