



**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

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