

COLLEGE OF SOCIAL WORK AND COMMUNITY DEVELOPMENT
UNIVERSITY OF THE PHILIPPINES
DILIMAN, QUEZON CITY

PERMIT FOR COMPLETION / EXAMINATION / REMOVAL

Mr./Ms. _____ is hereby permitted to take Examination/Completion in _____ for the
[] removal or [] completion of his/her condition in this subject incurred this _____ semester/summer_____.

Approved by:

Instructor's Signature

DEAN

Date of Completion / Removal: _____ Fee: _____ Paid O.R. #: _____

NOTE: No Removal examination/completion of **INC** shall be given without this permit duly approved.
IF EXAMINATION/COMPLETION IS BEYOND THE DATE OF EXAMINATION/COMPLETION, IT WILL BE INVALID. This permit
must be attached to the report of the Instructor/Professor giving the removal/completion.

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