



College of Social Work and Community Development
 University of the Philippines
 Diliman, Quezon City

Form No. **CSWCD.TH-05**
 SS 2016-2017 MTVT

_____ (Date)

The Dean
 College of Social Work & Community Development
 University of the Philippines
 Diliman, Quezon City
 Philippines

Dear Dean _____:

We have the honor to inform you that the undersigned served in the oral examination of _____, a Master thesis entitled:

on _____ and voted as follows:

	Name	For Approval	For Disapproval
Chairperson			
Adviser			
Critic/Reader			
Member			
Member			
Member			
Member			

Committee's decision, please check one: Passed Failed

Additional Remarks: _____

Sincerely,

 Chairperson/Adviser

Noted By:

 Dean