



UNIVERSITY OF THE PHILIPPINES VISAYAS

**GRADUATE SCHOOL**

General Luna St., 5000 Iloilo City, Philippines  
Email Address: [gs-secretary.upvisayas@up.edu.ph](mailto:gs-secretary.upvisayas@up.edu.ph)



**PERMIT FOR COMPLETION OF INC / REMOVAL OF 4.0**

Permit is hereby granted to: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_ Degree Program: \_\_\_\_\_

Student Number: \_\_\_\_\_ E-mail: \_\_\_\_\_ Contact No.: \_\_\_\_\_

to ☐ complete his/her INCOMPLETE ☐ remove his/her grade of 4.0

in \_\_\_\_\_ incurred \_\_\_\_\_ Semester/Trimester/Midyear AY \_\_\_\_\_.

Completion/Removal examination should be taken on or before \_\_\_\_\_.

Fee: \_\_\_\_\_ O.R. #: \_\_\_\_\_ Date of payment: \_\_\_\_\_

Recommended by: \_\_\_\_\_ Approved: \_\_\_\_\_

\_\_\_\_\_  
Instructor Graduate School Secretary

No examination will be given without this permit duly approved. Valid until \_\_\_\_\_.  
EXAMINATION GIVEN BEYOND THIS DATE WILL BE INVALIDATED. This permit must be attached to the Report  
of Completion Grade of the Instructor giving the examination.



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