POLYTECHNIC COLLEGE OF THE CITY OF MEYCAUAYAN
Pag-asa Street, Malhacan, City of Meycauayan, Bulacan
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PCCM ANNEX CAMPUS
Sitio Cabatuhan, Camalig, City of Meycauayan, Bulacan

OFFICE OF THE REGISTRAR

COMPLETION PERMIT

INSTRUCTION:
The student concern must fill out this form legibly and accurately (Print or Type all entries) except the column for completion grade which shall be filled out by the Professor/Instructor concerned. *False statement* made therein shall be sufficient for the nullification of the completion grade given. A grade of "Inc." *not completed within one (1) semester* from the date it was received *automatically becomes* **"5"** **(failed).**

Name of Student: _____
Course/Year/Section: _____
Term Enrolled: **Semester, Academic Year -**
Subject Code: _____
Subject Description: _____
Unit(s): _____
Activity Accomplished: _____

COMPLETION GRADE OBTAINED	

Instructor: _____
Signature over Printed Name
Noted by: _____
Program Head
Approved by: _____
College Dean
_____
College Registrar
Date: _____

PROGRAM HEAD'S COPY

DEAN'S COPY

REGISTRAR'S COPY

STUDENT'S COPY