

UNIVERSITY OF THE PHILIPPINES LOS BAÑOS
GRADUATE SCHOOL

College, Laguna 4031
Philippines

This is to certify that _____

(Name of student)

has satisfied the pre-requisite as follows:

Higher Course Course No. and Title	Pre-requisite(s) Course No. and Title	Course Equivalent to Pre-requisite Course No. and Title
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Equivalent course taken at _____
during _____ Semester/Term 19 _____ with grade of _____.

Department Chairman