

**REMEDIALS COURSE CLASS LIST**

TERM/ACADEMIC YEAR	COURSE TITLE	CLASS SCHEDULE	ROOM	COURSE CODE/ SECTION	REMIATION INSTRUCTOR

	STUDENT NUMBER	STUDENT'S NAME	ENROLLMENT STATUS	COURSE INFORMATION			REMARKS
				SECTION	SY/ TERM OBTAINED	COURSE INSTRUCTOR	
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PREPARED BY (CLUSTER COORDINATOR):
SIGNATURE OVER PRINTED NAME/ DATE

APPROVED BY (PRINCIPAL)	RECEIVED BY:
SIGNATURE OVER PRINTED NAME/ DATE	SIGNATURE OVER PRINTED NAME/ DATE