

Campus Administrator

GUIDELINES FOR REQUEST OF PHASING-OUT OF AN **EXISTING PROGRAM**

WEST VISAYAS STATE UNIVERSITY

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A. L	Definition of the Degree Pr	ogram/Specialization
1	. Full and exact name of th	ne existing program:
2	. Year of first implementati Academic Year: Semester:	
3	. Year of Intended Phase-of Academic Year:Semester:	
program: Department/Division:		rision, college/school and campus implementing the
	Campus:	
D. F	Reasons of Phasing-out th	e Frogram
Prepared by	:	Reviewed By:
Prop	onent/s	Dean of the College/ Dean of Instruction Local Curriculum Review Committee Chairperson
Noted by (F	or External Campus):	