



DAILY TIME RECORD FOR PART-TIME INSTRUCTORS

Name: **LORRAINE CRISTY E. CENIZA**

Department: **ITEEM**



For the Month of: **DECEMBER**

Year: **2022**

Day	AM						PM						Daily Total (hours)
	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	
1	7:00	10:00					1:00	5:30					7.5
2	8:30	2:30					4:00	5:30					7.5
3													
4													
5	8:30	2:30					4:00	5:30					7.5
6	7:00	10:00					1:00	5:30					7.5
7													
8													
9	8:30	2:30					4:00	5:30					7.5
10													
11													
12	8:30	2:30					4:00	5:30					7.5
13	7:00	10:00					1:00	5:30					7.5
14													
15	7:00	10:00					1:00	5:30					7.5
16	8:30	2:30					4:00	5:30					7.5
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													

GRAND TOTAL 67.5

I HEREBY CERTIFY on my honor that the above record is a true and correct report on the hours of work performed made daily at the time of arrival(s) and departure(s).

	
Signature of Part-time Instructor	Printed Name and Signature of Dept. Head