

Civil Service Form No. 49

**DAILY TIME RECORD**

THELMA P. APAS  
(NAME)

For the month of APRIL 2021

Official hours for arrival (Regular days: \_\_\_\_\_)  
And Departure (Saturdays: \_\_\_\_\_)

DAY	A. M.		P. M.		UNDERTIME	
	Arrival	Departure	Arrival	Departure	Hours	Minutes
1	8:00	12:05	12:55	5:05		
2						Saturday
3						Sunday
4	7:40	12:00	12:55	5:00		
5	8:00	12:00	12:55	5:00		
6	8:00	12:05	12:55	5:00		
7	8:00	12:00	12:55	5:00		
8	8:00	12:00	12:55	5:00		
9						Saturday
10						Sunday
11						
12	WORK SUSPENDED - ACATION					
13						
14	HOLD THURSDAY					
15	GOOD FRIDAY					
16						Saturday
17						Sunday
18	7:50	12:00	12:50	5:00		
19	8:00	12:00	12:55	5:00		
20	8:00	12:00	12:55	5:00		
21	8:00	12:00	12:55	5:00		
22	8:00	12:00	1:00	5:00		
23						Saturday
24						Sunday
25	8:00	12:05	12:55	5:00		
26	8:00	12:05	12:55	5:00		
27						
28	Calamity Leave					
29						
30						Saturday
31						
<b>TOTAL</b>						
I certify on my honor that the above is a true and correct report of the hours of work performed, record of which was made daily at the time of arrival and departure from office.						
VERIFIED as to the prescribed office hours						
<u>ELIZABETH S. QUEVEDO</u> In-Charge						

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Stamp of Date of Receipt

**OR LEAVE**

(First)	(Middle)
AS	THELMA P.
5. SALARY _____	
<b>PLICATION</b>	
<b>5.B DETAILS OF LEAVE</b>	
In case of Vacation/Special Privilege Leave:	
Within the Philippines _____	
Abroad (Specify) _____	
In case of Sick Leave:	
In Hospital (Specify Illness) _____	
Out Patient (Specify Illness) _____	
In case of Special Leave Benefits for Women:	
(Specify Illness) _____	
In case of Study Leave:	
Completion of Master's Degree _____	
BAR/Board Examination Review _____	
Other purpose:	
Monetization of Leave Credits _____	
Terminal Leave _____	
<b>5.D COMMUTATION</b>	
Not Requested _____	
Requested _____	
<u>THELMA P. APAS</u> (Signature of Applicant)	
<b>ON APPLICATION</b>	
<b>7.B RECOMMENDATION</b>	
For approval _____	
For disapproval due to _____	
_____	
<u>ELIZABETH S. QUEVEDO</u> Office/Dept./Unit (Authorized Officer)	
<b>7.D DISAPPROVED DUE TO:</b>	
_____	
_____	
_____	
<b>ULIN</b>	
_____	
_____	
_____	