Civil Service Form 48

DAILY TIME RECORD
CERNA, JULIOUS B.
(NAME)
For the month of
January 1 - 31, 2022
Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM IN	AM OUT	PM IN	PM OUT	T/U	Total
1-SAT						Off
2-SUN						Off
3-MON	} CALAMITY LEAVE					Absent
4-TUE						Absent
5-WED	8:00	12:00	1:00	5:30		Absent
6-THU	8:30	12:00	1:00	5:00		Absent
7-FRI	8:25	12:00	1:00	5:15		Absent
8-SAT						Off
9-SUN						Off
10-MON	9:00	12:00	1:00	5:30		Absent
11-TUE	9:00	12:00	1:00	5:30		Absent
12-WED	9:00	12:00	1:00	5:20		Absent
13-THU	8:40	12:00	1:00	5:00		Absent
14-FRI	CALAMITY LEAVE					Absent
15-SAT						Off
16-SUN						Off
17-MON	9:30	12:00	1:00	5:00		Absent
18-TUE	9:00	12:00	1:00	5:30		Absent
19-WED	8:30	12:00	1:00	5:45		Absent
20-THU	9:30	12:00	1:00	5:30		Absent
21-FRI	9:25	12:00	1:00	5:30		Absent
22-SAT						Off
23-SUN						Off
24-MON	8:45	12:00	1:00	6:00		Absent
25-TUE	8:30	12:00	1:00	6:00		Absent
26-WED						Absent
27-THU	} LEAVE					Absent
28-FRI						Absent
29-SAT						Off
30-SUN						Off
31-MON	8:30	12:00	1:00	6:00		Absent

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

JULIOUS B. CERNA

VERIFIED as to prescribed office hours

LORINA A. GALVEZ
Department Head
Department of Food Science and Technology

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VERSITY
Leyte

Stamp of Date of Receipt

OR LEAVE

(First)	(Middle)
JULIOUS	**B.**

INSTRUCTOR I   5. SALARY _____ **₱ 0.00**

PLICATION

5.B DETAILS OF LEAVE

In case of Vacation/Special Privilege Leave:

Within the Philippines ____**Residence**____

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

D COMMUTATION

☐ Not Requested

☐ Requested

JULIOUS B. CERNA
(Signature of Applicant)

APPLICATION

B RECOMMENDATION

☐ For approval

☐ For disapproval due to _____

_____

_____

LORINA A. GALVEZ .
Department Head

DISAPPROVED DUE TO:

_____

_____

_____

N

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