



## DAILY TIME RECORD FOR PART-TIME INSTRUCTORS

Name: Ryan Angelo G. Bernardo

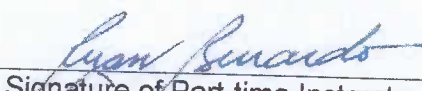
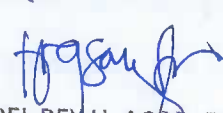
Department: Nursing

For the Month of: November

Year: 2021

Day	AM						PM						Daily Total (hours)
	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	
1													
2													
3													
4	8:00						12:00	1:00					
5	8:00						12:00	1:00				5:00	8 Hours
6	8:00						12:00	1:00				5:00	8 Hours
7												5:00	8 Hours
8													
9													
10													
11	8:00						12:00	1:00					
12	8:00						12:00	1:00				5:00	8 Hours
13	8:00						12:00	1:00				5:00	8 Hours
14												5:00	8 Hours
15													
16													
17													
18	8:00						12:00	1:00					
19	8:00						12:00	1:00				5:00	8 Hours
20	8:00						12:00	1:00				5:00	8 Hours
21												5:00	8 Hours
22													
23													
24													
25	8:00						12:00	1:00					
26	8:00						12:00	1:00				5:00	8 Hours
27	8:00						12:00	1:00				5:00	8 Hours
28												5:00	8 Hours
29													
30													
31													
<b>GRAND TOTAL</b>												96hrs	

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	 JOEL REY U. ACOB, DNS Printed Name and Signature of Dept. Head
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