



DAILY TIME RECORD FOR PART-TIME INSTRUCTORS

Name: **KARREN LISTHERWAY C. ISAAC**


For the Month of: **JUNE**

Department: **ITEEM**

Year: **2022**

Day	AM						PM						Daily Total (hours)
	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	
1	8:00	12:00					1:00	5:30					8.5
2	8:00	12:00					1:00	5:00					8
3	8:00	12:00					1:00	5:00					8
4													
5													
6	8:00	12:00					1:00	5:30					8.5
7	8:00	12:00					1:00	5:00					8
8	8:00	12:00					1:00	5:30					8.5
9	8:00	12:00					1:00	5:00					8
10	8:00	12:00					1:00	5:00					8
11													
12													
13	8:00	12:00					1:00	5:30					8.5
14	8:00	12:00					1:00	5:00					8
15	8:00	12:00					1:00	5:30					8.5
16	8:00	12:00					1:00	5:00					8
17	8:00	12:00					1:00	5:00					8
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													
GRAND TOTAL													106.5

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	ELIZA D. ESPINOSA Printed Name and Signature of Dept. Head
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