



DAILY TIME RECORD **CABASE, MICHELLE AUBREY D.** (NAME)

For the month of
June 1 - 30, 2025
Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-SUN						Off
2-MON	7:49	12:16	12:58	5:03		8hrs
3-TUE	8:06	12:08	12:15	5:36	6mins	7hrs 54mins
4-WED	7:47	12:34	12:57	5:02		8hrs
5-THU						OB
6-FRI						Holiday
7-SAT						Off
8-SUN						Off
9-MON	8:03	12:23	12:50	5:19	3mins	7hrs 57mins
10-TUE	7:56	12:19	12:59	5:12		8hrs
11-WED	8:13	12:03	12:38	5:02	13mins	7hrs 47mins
12-THU						Holiday
13-FRI	8:00	12:08	12:21	5:08		8hrs
14-SAT						Off
15-SUN						Off
16-MON	8:06	12:02	12:30	5:07	6mins	7hrs 54mins
17-TUE	8:00	12:12	12:34	5:22		8hrs
18-WED	7:59	12:35	12:35	5:14		8hrs
19-THU	7:56	12:16	12:59	5:14		8hrs
20-FRI	8:00	12:22	12:22	5:12		8hrs
21-SAT						Off
22-SUN						OB
23-MON						OB
24-TUE						OB
25-WED						OB
26-THU	8:05	12:00	12:45	5:04	5mins	7hrs 55mins
27-FRI	7:59	12:41	12:41	5:12		8hrs
28-SAT						Off
29-SUN						OB
30-MON						OB

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.

macabasedh
MICHELLE AUBREY D. CABASE

VERIFIED as to prescribed office hours

LEMUEL S. PRECIADOS

Department Head
Department of Economics

CHECKLIST OF DOCUMENTS TO SUPPORT REQUEST TO GO ON TRAVEL (please check):

- ☐ Medical Clearance from the VSU Infirmary that the employee have no symptoms of Covid 19
- ☐ Invitation from the organizer of the activity/conference/meeting (if applicable)
- ☐ Certification from the organizer that social distancing and other health/hygiene protocols against Covid 19 will be observed for the duration of the activity (if applicable)
- ☐ Quarantine passes issued by the destination LGU and if possible, together with passes from LGUs enroute to the destination
- ☐ Strong justification from the requesting party duly endorsed by the immediate supervisor on the necessity and urgency of the trip and commitment of the requesting party to religiously comply with health/hygiene protocols during the trip
- ☐ Waiver from the employee concerned that he/she is willing to undergo self quarantine for 14 days, while he/she will be on work from home scheme
- ☐ Approved list of outputs between supervisor and employee to be delivered/accomplished during his/her 14 days work from home scheme
- ☐ Clearance issued by the Nurse on duty 30 minutes prior to travel should be submitted to the guard on duty before allowing vehicle to go out of campus

Certified Correct:

macabasedh
MICHELLE AUBREY D. CABASE

Name of Travelling Employee

Noted/verified except Clearance from Nurse :

LEMUEL S. PRECIADOS

Name of Office Head/Supervisor

DOE-2024-