DAILY TIME RECORD CAPIN, ORLAN C.

For the month of August 1 - 31, 2022 Official hours for arrival and departure 8:00AM - 5:00PM

Day	AM		1	PM		
	IN	OUT	IN	OUT	T/U	Total
1-MON	7:18	12:02	12:05	5:01		
2-TUE	7:41	12:01	12:04	5:10		8hrs
3-WED	7:29	12:01	12:05	5:01		
4-THU	7:04	12:21	12:26	5:14		8hrs
5-FRI	7:30	12:18	12:20	5:02		8hrs
6-SAT *						Off
7-sun						Off
8-MON	7:16	12:00	12:02	5:05		
9-TUE	7:35	12:08	12:10	5:08		8hrs
10-WED	7:10	12:01	12:03	5:14		8hrs
11 -THU	7:21	12:02	12:03	5:08		8hrs
12-FRI	7:08	12:01	12:04	5:11		8hrs
13-SAT						Off
14-SUN			1			Off
15-MON	7:21	12:01	12:03	5:14		8hrs
16-TUE	7:25	12:00	12:02	5:16		8hrs
17-WED	7:23	12:05	12:08	5:01		8hrs
18-THU	7:02	12:02	12:03	5:03		8hrs
19-FRI				-		FL
20-SAT						Off
21-SUN						Off
22-MON						FL
23-TUE	7:21	12:10	12:14	5:18		1.11
24-WED	7:33	12:03	12:07	5:00		8hrs
25-тни	7:51	12:04	12:06	5:17		8hrs
26-FRI	7:09	12:05	12:08	5:01		OHIS
27-SAT				3.01	-	Off
28-SUN				-		Off
29-MON						Holiday
30-TUE	7:36	12:03	12:05	5:00		Honday
31-WED	7:20	12:12	12:13	5:15		8hrs

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.

VERIFIED as to prescribed office hours

ELIZA D. ESPINOSA

Department Head Institute of Tropical Ecology & Envi. Mgmt. > Philippines

Stamp of Date of Receipt

E UNIVERSITY

City, Leyte

(First)		(Middle)					
Orlan		Cabatingan					
		5. SALARY (Monthly)					
tive	Aide III						
API	PLICATION						
	6.b DETAILS O	F LEAVE:					
		tion/Special Privilege leave:					
irron	☐ Within the Philippines : ☐ Abroad (Pls. Specify) :						
iver	Abroad (Fi	s. Specify):					
	In case of Sick leave:						
	☐ In Hospital (Pls. Specify):						
	Out Patien	t (Pls. Specify) :					
	In case of Spec	cial Leave Benefits for Women:					
	(Specify Illness)						
	In and of Charles loove.						
	In case of Study leave: ☐ Completion of Master's Degree						
	□ BAR/Board Examination Review						
	Other purpose: Monetization of Leave Credits						
	☐ Terminal L						
	6.d COMMUTA	ATION					
	N Requeste	d □ Not Requested					
	Linquin						
		·					
		CAPIN, ORLAN C.					
		(Signature of Applicant)					
ON	ON APPLICAT						
	7.b RECOMM	ENDATION:					
re	☐ For Appr	oval					
	☐ For Disapproval due to:						
	☐ For Disag	oproval due to:					
	V h:						
	ELIZA D. ESPINOSA						
	Institute of Tropical Ecology & Envi Mgmt.						
	7.d DISAPPROVED due to:						
_							
o F.	TULIN /						

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