

## PERSONNEL RECORDS AND PERFORMANCE EVALUATION OFFCE

Visca Baybay City, Leyte 6521-A, Philippines Phone/Fax: +63 053 563 7323 Email Address: prpeo@vsu.edu.ph Website: www.vsu.edu.ph

## DAILY TIME RECORD FOR PART-TIME INSTRUCTORS

Name:	LIE	SMA	DIAZ	160	501	$\checkmark$	For the Month of:
Departme	ent:	FMD	CIFI	VE	2	TECHNOLOGY	Year

the Month of: DECEMBER

Day ARR DER ARR DER ARR DER ARR DER ARR DER ARR DER TOTAL	Department: FOOD SCIENCE & TECHNOLOGY Year: 2021									_				
ARR   DEP   DEP		АМ							PM					
1	Day	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	ARR	DEP	Total (hours)
2	1	10:00	11:30					4:00	5:00					
3 7.00 10.00		1		/p: @	11:30									
4       5       7:00		1	***************************************						<del>-</del> <del>-</del>					6.00
6 7:00   0:00   0:00   11:30   4:00   5:00   3:00														
6 7:00   0:00   0:00   11:30   4:00   5:00   3:00	5													
7		7:00	10:00	10:00	11:30			4:00	5:00					5.50
8	7	40,		10:00	11:30									3.00
9 7:25 10:00 10:00 11:30	8		•					4.00	5:00					2.5
10 7:45 10:00		7:25	10:00											
11	10													4.25
13         7:37         10:00         10:00         11:30         1:00         5:00         5:00         5:50 <t< td=""><td>11</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	11													
14       15       16       17       18       17       18       19 <td< td=""><td>12</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	12													
14       15       16         16       17       18         19       19       19         20       19       10         21       10       10         22       10       10         23       10       10         24       10       10         25       10       10         26       10       10         27       10       10         28       10       10         30       30       31	13	7:37	10:00	10:00	11:30			1:00	5:00					5:50
16       17       18       19 <td< td=""><td></td><td></td><td></td><td>•</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>				•										
17       18         19       19         20       19         21       19         22       19         23       19         24       19         28       19         30       31														
18       19         20       21         21       22         23       24         25       26         27       28         29       30         31       31														
19       0	17													
20       21         21       22         23       24         25       26         27       28         29       30         31       31	18													
21       22       23       24       22       23       24       25       26       27       28       29       30       31       32       32       32       32       32       32       33       32       33       32       33       32       33       33       34       32       32       32       33       33       34       32 <td< td=""><td>19</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	19													
22       3       4       3       4       3       4       3       4														
23	21													
24       25       26       27       28       29       30       31														
25														
26       27       28       29       30       31														
27       28       29       30       31							°							
28       29       30       31														
29       30       31														
30 31												1		
31														
	31													

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

Printed Name and Signature of Dept. Head

Vision: Mission: Page 1 of 1
FM-PRO-01
v1 05-27-2020
No. ()757 21-04