Civil Service Form 48

DAILY TIME RECORD POGOSA, JIMMY O.

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

Day	AM		PM		TOTAL	m
	IN	OUT	IN	OUT	T/U	Total
1-SUN						Off
2-MON						OBL
3-TUE						Holiday
4-WED	7:45	12:05	12:49	5:30		8hrs
5-THU	7:50	12:10	12:55	5:25		8hrs
6-FRI	7:20	12:05	12:47	5:37		8hrs
7-SAT						Off
8-SUN						Off
9-MON						Holiday
10-TUE	7:40	12:05	1:06	5:38		8hrs
11-WED	7:24	12:01	12:18	5:31		8hrs
12-THU	7:36	12:01	12:38	5:31		8hrs
13-FRI	7:31	12:04	12:16	5:28		8hrs
14-SAT						Off
15-SUN						Off
16-MON	7:32	12:06	12:50	5:20		8hrs
17-TUE	7:44	12:24	12:33	5:28		8hrs
18-WED	8:05	12:01	12:10	5:08		8hrs
19- THU	7:51	12:00	12:10	5:20		8hrs
20-FRI	6:17	12:10	12:55	5:55		8hrs
21-SAT						Off
22-SUN						Off
23-MON	7:12	12:00	12:54	5:48		8hrs
24-TUE	7:53	12:02	12:17	5:35		8hrs
25-WED	7:21	12:15	12:33	5:41		8hrs
26-THU	7:32	12:02	12:50	5:46		8hrs
27-FRI	7:44	12:06	12:10	5:35		8hrs
28-SAT						Off
29-SUN						Off
30-MON						OBL
31-TUE	7:22	12:26	12:36	5:59		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

JIMMY O. POGOSA

VERIFIED as to prescribed office hours

ELIZA DESPINOSA

Department Head Institute of Tropical Ecology & Envi. Mgmt.

Date Generated: Jul/25/2022 09:16:32



VIETYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

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:
VIMMY O POGOSA
Name of Travelling Employee
Noted/verified except Clearance from Nurse:

L ELIZA D. ESPINOSA Name of Office Head/Supervisor