

Civil Service Form 48

DAILY TIME RECORD **CAGANDE, LOREME S.** (NAME)

For the month of
February 1 - 28, 2023
Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-WED	6:47	12:14	12:27	5:11		8hrs
2-THU	7:52	12:07	12:55	5:01		8hrs
3-FRI	7:50	12:47	12:55	5:16		8hrs
4-SAT						Off
5-SUN						Off
6-MON	8:08	12:29	12:56	5:06	8mins	7hrs 52mins
7-TUE	7:49	12:01	12:51	5:29		8hrs
8-WED						FL
9-THU						FL
10-FRI						FL
11-SAT						Off
12-SUN						Off
13-MON						SL
14-TUE						SL
15-WED	7:16	12:03	12:46	5:04		8hrs
16-THU	8:01	12:03	12:55	5:20	1min	7hrs 59mins
17-FRI	7:58	12:08	12:44	5:12		8hrs
18-SAT						Off
19-SUN						Off
20-MON	7:34	12:07	12:53	5:02		8hrs
21-TUE	7:54	12:35	12:48	5:08		8hrs
22-WED	8:01	12:06	12:50	5:09	1min	7hrs 59mins
23-THU	7:52	12:04	12:45	5:09		8hrs
24-FRI						Holiday
25-SAT						Off
26-SUN						Off
27-MON	7:02	12:18	12:52	6:02		8hrs
28-TUE	7:43	12:02	12:47	5:03		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.

L. P. Cagande
LOREME S. CAGANDE

VERIFIED as to prescribed office hours

Ruth O. Escasinas
RUTH O. ESCASINAS
Department Head
Department of Agronomy

Philippines

UNIVERSITY
y, Leyte

Stamp of Date of Receipt

FOR LEAVE

(First)	(Middle)
Loreme	Silmaro
	5. SALARY (Monthly)
r I	

PLICATION

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:

- ☐ Within the Philippines :
☐ Abroad (Pls. Specify) :

In case of Sick leave:

- ☐ In Hospital (Pls. Specify) :
☐ Out Patient (Pls. Specify) :

In case of Special Leave Benefits for Women:
(Specify Illness)

In case of Study leave:

- ☐ BAR/Board Examination Review
☐ Completion of Master's Degree
☐ Completion of Doctorate Degree
☐ Completion of PHD Degree

Other purpose:

- ☐ Monetization of Leave Credits
☐ Terminal Leave

6.d COMMUTATION

- ☒ Requested ☐ Not Requested

L. P. Cagande
CAGANDE LOREME S.
(Signature of Applicant)

ON APPLICATION

7.b RECOMMENDATION:

- ☐ For Approval
☐ For Disapproval due to:

Ruth O. Escasinas
RUTH O. ESCASINAS
Department of Agronomy

7.d DISAPPROVED due to:

TULIN

Signature)
ident