Republic of the Philippines

**Department of Education**

Cordillera Administrative Region

**SCHOOLS DIVISION OF TABUK CITY**

City Hall Compound, Dagupan, Tabuk City, Kalinga

**Availment of Compensatory Time Off**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date

\_\_\_\_\_\_\_

Printed Name of Employee

Permission is requested to avail of:

 Compensatory Time Off

 Date of Availment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Compensatory Day Off

 Date of Availment

No. of Hours \_\_\_ \_\_\_

From\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Employee

|  |
| --- |
| **Certificate of Overtime Credits** |
| Total No. of Hours Available |  |

Recommending Approval:

Approved:

 **DOROTHY S. ASINGAL**

**Administrative Officer V**

****Republic of the Philippines

**Department of Education**

Cordillera Administrative Region

**SCHOOLS DIVISION OF TABUK CITY**

City Hall Compound, Dagupan, Tabuk City, Kalinga

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No. of Hours \_\_\_ \_\_\_

From\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Employee

|  |
| --- |
| **Certificate of Overtime Credits** |
| Total No. of Hours Available |  |

Recommending Approval:

Approved:

 **DOROTHY S. ASINGAL**

**Administrative Officer V**