FACULTY SERVICE RECORD

1st /Trimester AY 2022-2023

PRINTED NAME:		Tinao (Family)				Maria Maura (Given)				S (M.I.)	FACULTY:	FICS
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Course						No. of Course Credits Students w/o multipliers		ltipliers Units			Teaching Load Credits w/Multipliers	
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					(A)	(B)		(A x B)		(to be filled by UPOU Faculty Dean)		aculty
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8	В.	In Othe	r UP Un	its (Indi	cate UP u	ınit/s	***************************************)	. •		
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COLL NOTE:	EGE OUT A faculty r	nember tea	aching in	another	U.P. Coll	ege or AU s	hould file	a separa	ate Form 67	(FSR) in tl	hat college or	AU. A
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chair, etc.). Specify UP units where administrative workload is to be credited. Include even if no load credit or no honorarium is received. Program Chairs and Faculty Deans should initial to indicate that the load credit units for work inside the Faculty are approved at their level.

Position/Nature of Administration Work Program Development Associate/ UPOU Repository

Office/Unit Office of the Vice Chancellor for Academic Affairs

Approved Credit Units 3

COMPED 10 UPOU 80 6 TOTAL: 6.0 EXTENSION AND COMMUNITY SERVICE (e.g., training programs, services to UP-PGH, Pahinungod Include all extension and community service this semester- and all work in the immediately preceding sen which was not reported at that time- even if no load credits or honorarium are received. Program chairs and I should initial the credit units which they approved or endorsed. Position/Nature of Extension Work Office/Unit Approved Credit Units TOTAL: STUDY LOAD: Degree enrolled in: University enrolled in: On full study leave with pay? Yes No Recipient of faculty fellowship? Yes No Total Units enrolled in TOTAL FACULTY LOAD IN CREDIT UNITS LIMITED PRACTICE OF PROFESSION Have you applied for official permission for limited practice of profession? Yes No If yes, indicate date (MM/DD/YY) permission was submitted and approved				Titung			
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date of signing. The Program Chair and the Faculty Dean certify to the correctness of the reported data on teaching, administrative and study load. PRINTED NAMES AND SIGNATURES. Diego S. Maranan . Amoloza Date Note: Every faculty member in residence (i.e., receiving salary from UP), including those in full study leave with pay,

CERTIFICATION: The faculty member certifies that all information provided above is correct as of the

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fellowship or sabbatical, is required to fill up a Faculty Service Record every semester. File copies of this form shall be maintained in the Faculty, at the OUR and at the OVCAA.