

**BORROWERS SLIP**

Name: _____ Date Borrowed: _____

Department: _____ Date Returned: _____

Item No.	Quantity	Unit	Description	Remarks
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Purposed:				

Prepared by:

(Signature over Printed Name)

Approved by:

VisionProvider of Skilled Welder in
Central Luzon**Mission**To Prepare Trainees for Initial and Continued
Employment