

JOMALIA ABELLERA ANDAYA

Ph10b, pkg6, blk4, lot27, Bagong Silang Cal. City

Cell phone no. 09098397866

Email Add: jomalia_andaya041788@y.c



Career Objective: To apply my knowledge effectively and efficiently to the field I was assigned and to enhance my skills.

PERSONAL DATA

Birthday: April 17, 1988

Nickname: Jhome

Birth Place: Caloocan City

Age: 20yrs. old

Sex: Female

Religion: Roman Catholic

Height: 5'3"

Weight: 90 lbs.

Fathers Name: Maximo A. Andaya

Occupation: Retired Army

Mothers Name: Josephine A. Andaya

Occupation: Housekeeper

EDUCATIONAL ATTAINMENT

TERTIARY

: University of Caloocan City
: BSBA-Management Accounting, 4th Year
: Camarin, Caloocan City
: June 2005-present

SECONDARY

: Kalayaan National High School
: Caloocan City
: June 2001-April 2005

PRIMARY

: Kalayaan Elementary School
: Caloocan City
: June 1995-April 2001

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Republic of the Philippines
Department of Transportation and Communications
LAND TRANSPORTATION OFFICE
East Avenue, Quezon City

June 30, 2008
DATE

On-the-Job Training Contract

I, Jonalisa A. Andaya, a student presently enrolled at University Of Calicut City, pursuant to the Memorandum Circular dated 10 January 1975 of the Labor, hereby abide by the following terms and conditions in connection with the practicum course or on-the-job training with the Land Transportation Office:

1. That I shall observe all existing reasonable office rules and regulations of the LTO while on training;
2. That I shall not claim nor be paid any compensation whatsoever while on training;
3. That the LTO shall have no liability for any injury and/or incapacity that may befall me while inside the LTO compound and its premises due to my fault or negligence or fortuitous event while undergoing training;
4. That I shall undergo office training in the LTO in compliance with the requirements of my course;
5. That I shall submit all the necessary requirements required by the Office before undergoing training.

In witness hereof, I have hereunto set my signature on this 1st day of July at LTO office.

Conforme:

[Signature]
Teacher-Supervisor

[Signature]
Andaya, Jomalisa A.
Student-Trainee
With my Parental Consent

JOSEPTINE ANDAYA
Parent/Guardian's Name and Address

Action by the Office

To: _____

Having complied with the required documents and condition for On-the-Job Training, your request for office training at the _____, this Office is hereby granted subject to the final approval by the Assistant Secretary.

Recommending Approval:

Approval Recommended:

[Signature]
BELLA A. SAN PEDRO
Chief, Personnel Section

Approved:

[Signature]
Atty. JIMMY G. PESIGAN
Acting Executive Director



REPUBLIC OF THE PHILIPPINES
OFFICE OF THE BARANGAY CHAIRMAN
Barangay 176, Zone 15, District 1
Bagong Silang, Caloocan City

FILE NO.: 08- 26420

HON. CESAR R. PADILLA
Barangay Chairman

CERTIFICATION

KAGAWADS:

JOEL S. BACOLOD

APOLINARIO D. TRINIDAD

AIDA G. CORRALES

DANILO V. CASTRO

RUTH F. FRADEJAS

CARLITO C. PERALTA

EMILY B. GALVAN

This is to certify that JOMALIA A. ANDAYA,
20 years old, SINGLE, Filipino a bonafide resident
of PHase 10b Package 6 Block 4 Lot 28 Barangay 176,
Bagong Silang, Caloocan City.

This certification is being issued upon the request of interested
party for SCHOOL REQUIREMENT purpose.
OJT REQUIREMENT

Issued this 30th day of JUNE 2008 at Barangay
176, Bagong Silang, Caloocan City.

ROWENA CULA
SK Chairman

JOSE "Jun" ABACA JR.
Barangay Secretary

RAFAELINA R. ALONZO
Barangay Treasurer


HON. CESAR R. PADILLA
Barangay Chairman

For and by authority of the
BARANGAY CHAIRMAN:


JOSE "Jun" J. ABACA JR.
Barangay Secretary

CTC No.: 09697362
Issued at: CAL CITY
Issued on.: 063008
O.R. No.: _____
Amount: _____

Note: Not valid if there are erasures or without dry seal. This Brgy. Clearance is valid for 6 months from date of issue.



UNIVERSITY OF CALOOCAN CITY
Gen. San Miguel St., Sangandaan Caloocan City

College of Business and Accountancy

Date: July 1, 2008

LTO office
East Avenue
Quezon City

Sir/Madam:

We are pleased to inform you that the **University of Caloocan City (UCC) Business Administration Department** is requesting each fourth (4th) year student to undergo **On the Job Training (OJT)** in some private/government offices.

In connection with this, may we recommend Andaya, Jomalia for an OJT on your office? He/She is required to undergo a maximum of 300 hours in his/her office assignment.

Whatever favors and consideration that may be granted regarding this matter could be highly appreciated.

Thank you very much.

Very truly yours


MELINDA M. BAUTISTA, Ph.D
Head College of Business
Administration & Accountancy

Land Transportation Office
East Avenue, Quezon City

presents this
Certificate of Completion

to

JOMALIA A. ANDAYA

UNIVERSITY of CALOOCAN City
CAMARIN, CALOOCAN City

for having satisfactorily completed three hundred (300) hours
On-the-Job Training at the Computer Section, Management Information Division
for the period 01 July 2008 to 14 October 2008

Given this 21st day of October 2008 at Land Transportation Office
East Avenue, Quezon City

Bella A. San Pedro
BELLA A. SAN PEDRO
Chief, Personnel Section



UNIVERSITY OF CALOOCAN CITY
College of Business and Accountancy

Campuses: Sangandaan 324-6855 / Tandang Sora 324-6843 / Camarin 962-9799

STUDENT - TRAINEE JOB RATING SHEET

Name of Trainee : JOMELIA A. ANDAYA
Company : LAND TRANSPORTATION OFFICE
Department/Section : MANAGEMENT INFORMATION DIVISION
Period of Training : 300 HOURS

Please rate the Student-trainee for each factor below by checking the appropriate column.

	5	4	3	2	1
Outstanding	Very Satisfactory	Satisfactory	Fair	Unsatisfactory	
EVALUATING CRITERIA					
1. Works accurately, thoroughly, and neatly.	<input checked="" type="checkbox"/>				
2. Ability to communicate ideas effectively (both Oral and Written).	<input checked="" type="checkbox"/>				
3. Ability to follow oral and written instruction.	<input checked="" type="checkbox"/>				
4. Punctuality in reporting for work and submitting finished job assignments.	<input checked="" type="checkbox"/>				
5. Receiving and making telephone calls courteously and tactfully.	<input checked="" type="checkbox"/>				
6. Hardworking, energetic and conscientious.	<input checked="" type="checkbox"/>				
7. Loyal and cooperative.	<input checked="" type="checkbox"/>				
8. Sense of responsibility.	<input checked="" type="checkbox"/>				
9. Possess high level of initiative, drive and resourceful.	<input checked="" type="checkbox"/>				
10. Dependable and works with less supervision.	<input checked="" type="checkbox"/>				
11. Shows exceptional enthusiasm about his/her job.	<input checked="" type="checkbox"/>				
12. Grasp new assignments quickly and anticipate developments.	<input checked="" type="checkbox"/>				
13. Uses and safe keep, tools and equipments and office supplies properly.	<input checked="" type="checkbox"/>				
14. Maintains good attendance on the job.	<input checked="" type="checkbox"/>				
15. Good personal appearance: poise, neatness and bearing.	<input checked="" type="checkbox"/>				
16. Maintains harmonious relation with supervisors, employees and co-trainees.	<input checked="" type="checkbox"/>				

TO THE MANAGER/SUPERVISOR:

We wish to thank you and the whole organization for giving our students a chance to work with you during On-the-job training program.

Thank you very much also for your patience and understanding. The fruitful times they shared with you will stay and will be cherished by each of them.

Very Truly Yours,

MELINDA M. BAUTISTA, PhD
Dean, College of Business and Accountancy

Remarks: Mrs. Andaya expressed herself well w/ FBMS. She exudes a happy disposition when it comes to her work attitude. She is diligent and work w/ less supervision, she could easily adapt to the task assigned. She is courteous & punctual.

Immediate Supervisor:

Signature : *Paquita Dela Cruz*
Typewritten/Printed Name : PAQUITA DELA CRUZ
Designation : CHIEF, MID COMPUTER SECTION

Andaya Jomalia
FIRST TO FIFTEENTH
THIS SIDE FRONT

PROVINCIAL FORM No. 185

No. _____ (Province or City)

Office hours { Regular days
Saturdays } October

(Office) (Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
1						
2						
3	8:00	6:00	7:00			
4	4:50	6:00	7:00			
5						
6						
7	9:00	5:00				
8						
9	1:00	6:30	7:00			
10	9:00	6:10	7:00			
11	9:30	6:00				
12						
13						
14	11:00	1:30	7:00			
15						

ABSENCES AND UNDERTIME
I hereby certify upon my honor that the entries on this time record, which were made daily at the time of arrival at and departure from Office, are a true and correct report of the hours of work performed.

(Employee)

Andaya Jomalia
FIRST TO FIFTEENTH
THIS SIDE FRONT

PROVINCIAL FORM No. 185

No. _____ (Province or City)

Office hours { Regular days
Saturdays } September

(Office) (Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
1						
2	9:00	6:00				
3						
4						
5						
6	9:00	6:00	7:00			
7						
8						
9	8:00	5:00				
10						
11						
12	8:30	4:00	7:00			
13	9:30	4:40	7:00			
14						
15						

ABSENCES AND UNDERTIME
I hereby certify upon my honor that the entries on this time record, which were made daily at the time of arrival at and departure from Office, are a true and correct report of the hours of work performed.

(Employee)

Samalinda, Andaya
SIXTEENTH TO THIRTY-FIRST

THIS SIDE BACK

PROVINCIAL FORM No. 155

No. _____

(Province or City)

Office hours _____

Regular days
August

(Office)

(Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
16						
17						
18						
19		4:00				
20						
21		5:30				
22		5:30				
23		5:30				
24						
25						
26		5:45				
27		5:30				
28		5:30				
29		5:30				
30						
31						

Verified and found correct as to the prescribed office hours

In Charge

Andaya, Samalinda A.

FIRST TO FIFTEENTH

THIS SIDE FRONT

PROV. FORM No. 185

No. _____

(Province or City)

Office hours _____

Regular days
JULY 2008
Saturday

(Office)

(Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
1	9:00	6:00	6:00			8
2						
3	11:30	6:30				5
4	8:40	1:40				5:30
5	8:40	5:40				4
6	8:40	6:40				9
7						
8						
9						
10	1:00	4:45				5
11	8:40	5:30				8:30
12	5:30	4:40				6:30
13						
14						
15	9:00	5:20				7:30

ABSENCE AND UNDERTIMES
 I hereby certify upon my honor that the entries on this time record, which were made daily at the time of arrival at and departure from Office, are a true and correct report of the hours of work performed.

(Employee)

Andaya, Joseph A.
FIRST TO FIFTEENTH
 THIS SIDE FRONT

PROVINCIAL FORM No. 186

No. _____ (Province or City)

Office hours { Regular days _____
 Saturdays _____
 (Office) August (Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
1	9:00	5:00				
2						
3						
4						
5	9:00	5:10				
6						
7	11:00	6:00				
8	9:00	5:10				
9	9:00	6:30				
10						
11						
12	9:00	6:50				
13						
14	11:00	4:30				
15	10:00	5:00				

ABSENCES AND UNDERTAKES
 I HEREBY certify upon my honor that the entries on this time record, which were made daily at the time of arrival at and departure from Office, are a true and correct report of the hours of work performed.

(Employee)

Andaya, Jonathan A.

FIRST TO FIFTEENTH
 THIS SIDE FRONT

Prov. Form No. 186

No. _____ (Province or City)

Office hours { Regular days _____
 Saturdays _____
 (Office) JULY 2008 (Month)

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
1	9:00	6:00				8
2						
3	11:00	6:30				5
4	8:40	1:40				5:20
5	8:00	5:00				4
6	8:00	6:00				9
7						
8						
9						
10	1:30	4:45				3
11	8:00	5:30				8:30
12	5:30	4:00				6:30
13						
14						
15	9:00	5:20				7:30

ABSENCES AND UNDERTAKES
 I HEREBY certify upon my honor that the entries on this time record, which were made daily at the time of arrival at and departure from Office, are a true and correct report of the hours of work performed.

(Employee)

Andaya, Jomalia A.
SIXTEENTH TO THIRTY-FIRST
 THIS SIDE BACK

PROVINCIAL FORM No. 186

No. _____ (Province or City)

Office hours { Regular days _____
 Saturdays _____

(Office) _____ (Month) _____

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

Verified and found correct as to the prescribed office hours

In Charge _____

Andaya, Jomalia A.
SIXTEENTH TO THIRTY-FIRST
 THIS SIDE BACK

PROVINCIAL FORM No. 186

No. _____ (Province or City)

Office hours { Regular days _____
 Saturdays _____

(Office) _____ (Month) September

	MORNING	NOON	NOON	NIGHT	EXTRA	EXTRA
	IN	OUT	IN	OUT	IN	OUT
16	9:30	4:00				
17						
18						
19						
20						
21						
22						
23						
24						
25	1:00	6:00				
26						
27						
28						
29						
30	8:45	6:00				
31						

Verified and found correct as to the prescribed office hours

In Charge _____