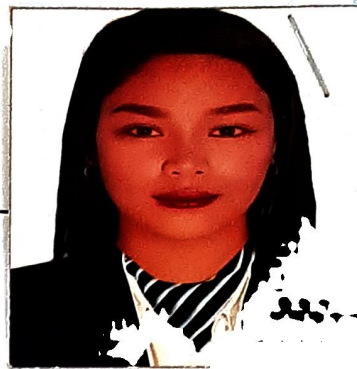


File



KYLINE MARY I. PAJAROJA

Home Address : 0463 Brgy. Botocan Area 6, Quezon City

Cellphone Number : 09674535548

E-mail Address : pajaroja.108297140363@depedqc.ph

Date of Birth : April 02, 2003

Gender : Female

Field of Training : Humanities and Social Sciences

EDUCATION	YEAR GRADUATED
<b>JOSE VELASQUEZ. PALMA SENIOR HIGH SCHOOL</b> <i>Senior High School</i>	in progress (2023)
<b>NORTH FAIRVIEW HIGH SCHOOL</b> <i>Junior High School</i>	2020
<b>NORTH FAIRVIEW ELEMENTARY SCHOOL</b> <i>Elementary School</i>	2015

Field of Study	HUMANITIES AND SOCIAL SCIENCES
Relevant Work Experience	NONE
Skills / Qualifications	<b>Computer Skills:</b> <i>Fast Typer</i>  <b>Communication Skills:</b> <i>I have a good communication skills that help me to understand and to communicate effectively with those people around me.</i>
Special Awards / Honors / Certificates	<ul style="list-style-type: none"> <li>• Perfect Attendance Awardee (2015)</li> <li>• With Honors Awardee (2015)</li> </ul>
Activities & Interests	<ul style="list-style-type: none"> <li>• Restaurant Skills (<i>setting tables and chairs</i>)</li> <li>• Kitchen Skills (<i>proper hygiene and food handling</i>)</li> </ul>

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

173-3

DATE

**On-the-Job Training Contract**

I, Kyline Mary L. Pijaraja, a student presently enrolled at Jose Velasquez Palma Senior High School, 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 \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_.

Conform5e:

\_\_\_\_\_  
Student-Trainee  
With my Parental Consent

\_\_\_\_\_  
Teacher-Supervisor

\_\_\_\_\_  
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:

\_\_\_\_\_  
**LADIE LYN G. FUDERANAN**  
Administrative Officer IV  
OIC, Human Resource Development Section



REPUBLIC OF THE PHILIPPINES  
Metropolitan Manila, Quezon City  
*Office of the Barangay Chairperson*  
Barangay Botocan, District IV, Quezon City  
Tel. No. 8 636 9338



Control No. 2023-148

**HON. ROSALYN R. BALLAD**  
Barangay Chairperson

**COUNCIL MEMBERS:**

**HON. CYRIL S. LEE**  
Chairperson  
Comm. on Peace & Order  
Comm. on Transportation

**HON. ARTURO J. GARCIA**  
Chairperson  
Comm. on Finance & Education

**HON. JANE S. BARRIENTOS**  
Chairperson  
Comm. on Appropriation  
Comm. on Health

**HON. BENJAMIN A. EREDIANO**  
Chairperson  
Comm. on Infrastructure

**HON. LORIGEN A. MUMAR**  
Chairperson  
Comm. on NGO's, PO's & Livelihood  
Vice Chairperson  
Comm. on Health

**HON. ERROL F. CEDO**  
Chairperson  
Comm. on GAD & BCPC

**HON. AMOR Y. MERCADO**  
Chairperson  
Comm. on Clean & Green

**HON. MARVIN M. GIMPES**  
SK Chairperson

**MS. MA. LUISA H. FUENTES**  
Barangay Secretary

**MS. IRENE E. JAVIER**  
Barangay Treasurer

February 27, 2023

## CERTIFICATION

**TO WHOM IT MAY CONCERN:**

This is to certify that Mr./Mrs./Ms. **KYLINE MARY ILAG PAJAROJA** single/widow/married, 19 years old, a Filipino citizen, a bonafide resident of Barangay Botocan with postal address # 0463 Area 6 ,BRGY.BOTOCAN,DIST. IV QUEZON CITY have never been charged for any kind of offenses and has no pending case before the Lupon Tagapamayapa of this barangay either civil or criminal case as of this date.

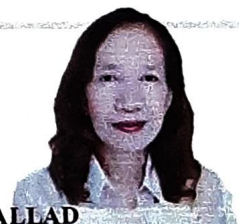
Issued on this 27<sup>TH</sup> day of February 2023 for whatever legal purpose it may best serve.

**PURPOSE: WORK IMMERSION**

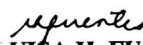
**Kyline Mary I. Pajaroja**  
Applicant's Signature

  
**ROSALYN RUIZ BALLAD**

**Barangay Chairperson**



Attested by:

  
**MA. LUISA H. FUENTES**  
Barangay Secretary



Land Transportation Office  
East Avenue, Quezon City

presents this

# Certificate of Completion

to

**KYLINE MARY L. PAJAROLA**

Jose V. Palma Senior High School

for having satisfactorily completed Eighty (80) hours  
On-the-Job Training at the Human Resource Development Section,  
for the period of March 1, 2023 to March 14, 2023

Given this 4<sup>th</sup> day of April 2023 at the Land Transportation Office  
East Avenue, Quezon City.



LADIE LYN G. FUDERANAN  
OIC, Human Resource Development Section



KYLINE MARY L. PAJAROLA  
04/17/2023

Certificate Information

NAME: Kyline Mary I. Pajaroja

SCHOOL: Jose V. Palma Senior High Sch.

TOTAL HOURS: 80 hours

DEPARTMENT ASSIGN: Human Resources  
Development Resources

DATE START: March 01, 2023

DATE END: March 19, 2023

DEPARTMENT OF EDUCATION  
Division of City Schools - Quezon City  
(Jose V. Palma Senior High School  
within Pinyahan Elementary School)  
Pinyahan St., Pinyahan, Quezon City



# WORK IMMERSION PORTFOLIO

(based on DepEd Order No. 30 s. 2017)

This belongs to:

RUFINO U. VIERNES

HUMSS-A

LAND TRANSPORTATION OFFICE

2023

## II. IMMERSION PROPER

A. **Objectives:** Appreciating management processes by observing, identifying and describing the following:

1. Nature of the business;
2. Description of the products/services;
3. Target clientele;
4. Organizational structure;
5. Company rules and regulations

**Skills Indicator:** (10) - Excellent (9) - Very Good (8) - Good (7) - Fair (6) - Poor Performance

*\*To be rated by the Work Immersion Partner Institution Supervisor and Work Immersion Teacher, to be indicated in the Performance Task 1*

Competency	Activity No.	Task/Output/Artefact	Performance Rating					Rate	
			10	9	8	7	6	Supervisor 60%	Teacher 40%
Nature of the business	14	Written narrative on company profile			✓				
Description of the products / services	14	Pictures of products / services or written narrative on activities performed		✓					
Target clientele	14	Business profile			✓				
Organizational structure	15	Organizational chart		✓					
Company rules & regulations	16	Company handbook or list of rules & regulations			✓				
<b>Perfect Score: 50</b>		<b>Total Raw Score</b>							
<b>Descriptor</b>		<b>Average = Total Raw Score/ no. of activities</b>	Ex. 10/ Excellent					84%	

What went well? she is hardworking and good in computer.

What needs to be improved? her communications skills needs to be improved.

Feedback of Supervisor: overall feedback to her is that she is a very hardworking person and easy to work with.

JAN MICHAEL S. IBU  
Name and Signature of Supervisor

Feedback of Work Immersion Teacher: \_\_\_\_\_

\_\_\_\_\_  
Name and Signature of Immersion Teacher



# IMMERSION PROPER

**B. Objectives:** Appreciating business processes by observing and participating in Safety / Production / Maintenance / Quality Control / Quality Assurance / Customer Satisfaction / Housekeeping / Hygiene and others

**Skills Indicator:** (10) - Excellent (9) - Very Good (8) - Good (7) - Fair (6) - Poor Performance

*\*To be rated by the Work Immersion Partner Institution Supervisor and Work Immersion Teacher, indicated in the Performance Task 2*

Competency	Activity No.	Performance Task/Output/Artefact	Performance Rating					Rate	
			10	9	8	7	6	Supervisor 60%	Teacher 40%
Safety / Production / Maintenance / Quality Control / Quality Assurance / Customer Satisfaction / Housekeeping / Hygiene and others	17	Written narrative on business processes of the company (may contain photos & charts)		✓					
	18	Written report on activities performed		✓					
	19	Business process flow chart		✓					
<b>Perfect Score: 30</b>		<b>Total Raw Score:</b>						<b>90%</b>	
<b>Descriptor</b>		<b>Average = Total Raw Score/ no. of activities</b>							

What went well? Personal Hygiene and other is good.

What needs to be improved? There will always be a room for improvement.

Feedback of Supervisor: I want them to do their very best everytime.

JAN MICHAEL S. IBO  
Name and Signature of Supervisor

Feedback of Work Immersion Teacher: \_\_\_\_\_

\_\_\_\_\_  
Name and Signature of Immersion Teacher

• IMMERSION PROPER

C. Objectives: Applying skills learned and proper values acquired in school.

Skills Indicator: (10) - Excellent (9) - Very Good (8) - Good (7) - Fair (6) - Poor Performance

To be rated by the Work Immersion Partner Institution Supervisor and Work Immersion Teacher, to be indicated in the Performance Task 3

Competency	Activity No.	Task/Output/Artefact	Performance Rating					Rate	
			10	9	8	7	6	Supervisor 60%	Teacher 40%
Applying skills learned and proper values acquired in school	20	Daily Time Record		✓					
	21	Daily Task Record or Daily Diary/ Journal			✓				
	22	Photos, illustrations of performed hands-on skills Work Performance (includes knowledge and quality of work)			✓				
	23	Personal Traits 1 (based on pleasing appearance, courtesy, conduct, industriousness, and reliability)		✓					
	24	Personal Trait 2 (based on sociability, drive and leadership, mental maturity and stress tolerance)			✓				
	25	Other related tasks							
Perfect Score: 60		Total Raw Score						70%	
Descriptor		Average = Total Raw Score / no. of activities							

What went well? she has a pleasing appearance, courtesy, honest and reliable.

What needs to be improved? none

Feedback of Supervisor: There will always be room for improvement but let the time come just be yourself always.

JAN MICHAEL S. IBU  
Name and Signature of Supervisor

Feedback of Work Immersion Teacher: \_\_\_\_\_

Name and Signature of Immersion Teacher





REPUBLIC OF THE PHILIPPINES  
DEPARTMENT OF TRANSPORTATION  
LAND TRANSPORTATION OFFICE

East Avenue, Quezon City  
E-mail Address: [lto@mailbox@lto.gov.ph](mailto:lto@mailbox@lto.gov.ph) • Website: [www.lto.gov.ph](http://www.lto.gov.ph)

Department Assign : Human Resources Development Resources

Daily Time Record for the Month of MARCH

Date	Morning		Afternoon		Total	Date	Morning		Afternoon		Total
	In	Out	In	Out			In	Out	In	Out	
1	7:30	12:00	1:00	4:45		16					
2	7:40	12:00	1:00	5:35		17					
3	8:00	12:00	12:40	5:00		18					
4						19					
5						20					
6	7:10	12:00	1:00	5:00		21					
7	7:30	12:00	12:40	5:00		22					
8	7:50	12:00	12:45	5:02		23					
9	7:50	12:00	12:50	4:50		24					
10	7:50	12:00	1:00	4:40		25					
11						26					
12						27					
13	7:30	12:00	1:00	5:00		28					
14	7:40	12:00	1:00	5:00		29					
15						30					
Total hours: 80 HOURS						31					

Total hours: \_\_\_\_\_

Kyline Mary ID. Palencia  
On-the-job Trainee

MARY MAY M. JACOB  
Authorized Supervisor