

PRACTICUM CONFIRMATION AND ACCEPTANCE FORM

IMPORTANT INFORMATION

- STUDENTS ACCEPTED FOR PRACTICUM IN A HOST COMPANY WILL HAVE TO ACCOMPLISH THIS FORM.
- ASK THE PRACTICUM SUPERVISOR/ COMPANY REPRESENTATIVE TO FILL IN THE DETAILS OF THE TRAINING.
- SUBMIT TO THE PRACTICUM ADVISER/COORDINATOR PRIOR TO THE START OF TRAINING.

NAME OF STUDENT	<u>LAN (ELOI M ABANTOS)</u>	STUDENT NUMBER	<u>221151524</u>
COURSE CODE	<u>IT149F</u>	SY/TERM ENROLLED	

This is to certify that Lanlelor M Abantos (name of student-trainee) has been accepted for practicum at City government of Binang City Public Binang City Laguna (name and address of establishment) and will be attached to the _____ department/s for a minimum of, but not limited to 486 hours. Training will commence on April 23, 2015 and is expected to end on July 11, 2015. Attached is the list of requirements.

COMPANY REPRESENTATIVE	<u>JENNY ANNE B. SARMIENTO</u> Head, City Human Resources Development Office	<u>Head of CHRD</u>
Signature over Printed Name		Official Designation
<u>CITY HUMAN RESOURCES DEVELOPMENT OFFICE</u>		<u>chrd6@binang.gov.ph / 049-513-5013</u>
Department		Email and Contact Number/s
NOTED BY	<u>Adman Ilav</u>	<u>5/2/2015</u>
Signature over printed name of Practicum Coordinator		Date

COPY: (1) STUDENT, (2) HOST COMPANY, (3) PRACTICUM COORDINATOR

FORM OVPAA 030B

THIS FORM IS AVAILABLE AT THE OVPAA