**PARENT/GUARDIAN CONSENT FORM**

We, **Jonel T. Malinao** and **Nieves T. Malinao**, hereby execute this Consent Form allowing my son/ daughter to undergo on-the-job training/ internship for a minimum of \_\_\_250\_\_ hours beginning \_\_March 04, 2024 \_until \_\_\_June 30, 2024\_\_\_ at **Commission On Audit** with office address at **Commonwealth Ave., Quezon City, Philippines** in partial fulfillment of the requirement for the **Bachelor of Science in Information Technology.**

We are aware that the immediate superior within the company will take all the necessary precautions to keep the students safe. The OJT Adviser and Quality Assurance Coordinator will also be there to periodically monitor the performance and safety of the students.

We execute this Consent Form in accordance with our free will, realizing the benefits that the student intern shall obtain from the said on-the-job training/ internship program.

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_JONEL TRINIDAD MALINAO\_\_\_\_\_\_  ***(Name and Signature of***  ***Student Intern)*** | \_\_\_\_\_NIEVES TRINIDAD MALINAO\_\_\_\_\_***(Name and Signature of***  ***Parent/ Guardian)*** |

REPUBLIC OF THE PHILIPPINES )

CITY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ) S.S.

Subscribed and sworn to before me, this \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Philippines, affiants exhibiting valid proofs of their identity as follows:

|  |  |  |
| --- | --- | --- |
| Name | ID No. | Issued at/on |
| \_\_JONEL TRINIDAD MALINAO\_\_ | \_3B41-0392-7802-4759\_ | \_27 MARCH, 2022\_ |
| \_\_NIEVES TRINIDAD MALINAO\_\_ | \_2760-5902-49B1-3421\_ | \_27 MARCH, 2022\_ |
|  |  |  |

They acknowledged to me that the foregoing Consent Form was executed in accordance with their own free will.

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Book No. \_\_\_\_;

Series of \_\_\_\_\_.