

REVISION NO.:	00
REVISION DATE:	May 10, 2016

## 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.

START OF TRAINING	
NAME OF STUDENT [Srat] G. Sumayo  COURSE CODE [T] 199F	SYMERM ENROLLED 24-25 3rd Term
This is to certify that \[ \frac{\text{\constraint} \text{\constraint}	
COMPANY REPRESENTATIVE A	
JENNY ALAND SARMIENTO  Head, City Human Resources Development Office	HR Repartment Head
Signature over Printed Name	Official Designation
City Human Resources Development Office	chrd@ binan.gov.ph / 1049 - 173-17013
Department	Email and Contact Number/s
NOTED BY	
Signature over printed name of Practicum Coordinator	
DOPY: (1) STUDENT; (2) MOST COMPANY; (3) PRACTICUM COORDINATOR	FORM-GYPAA 930B
	THIS FORM IS AVAILABLE AT THE OVPAA