

CLEARANCE FOR PROJECT HIRE EMPLOYEE

Department /Project : _____

Date : _____

Name of Employee : _____ Date Hired : _____

Position : _____ Last day of work : _____

Section/Department : _____ Immediate Superior : _____

() Resignation () End of Contract () Completion of Specific Phase of Work () Project Completion () Termination

Instruction : Please facilitate the proper turn over/settlement of accountabilities. Route and secure from authorized signatory.

OFFICE/DEPT/SECTION	NATURE OF ACCOUNTABILITY	AMOUNT / REMARKS	SIGNATURE
Immediate Superior /Project Manager	() Work Accountability () Files/ Document for Turn Over () Others, pls specify		
Project Accounting/ SAP Support	() Unliquidated Cash Advances () Others, pls specify () SAP License		
Project Quality	() Files/ Document for Turn Over () Others, pls specify		
Project Human Resource	() ID / HMI Card Surrendered () Termination / Waiver & Quit Claim docs () Timekeeper () Exit Interview () Others, pls specify		
Project ESH	() Files/ Document for Turn Over () Medical Clearance/ Check Up (c/o Occupational Health Nurse)		
Project Warehouse / Admin	() Tools () PPE () Others, pls specify		
Project Plant Division <i>if applicable</i>	() Plant Equipment () Others		
Payroll (Head Office)			
ICT (Head Office) <i>if applicable</i>	() Cellphone () Laptop () Email allocation () Others, pls specify		
Functional Head (Head Office) <i>if applicable</i>			

This clearance shall serve as acknowledgement of the termination/demobilization notice issued to me by the Project/Department and to attest my conformity to the settlement of the accountabilities indicated above by the different Project Offices/ Head Office Departments.

I hereby authorize the Company to deduct from my receivable final pay any amount of accountabilities as declared above.

Conforme : _____
(Printed Name Signature of Employee)

Verified by : _____
Project HR

Noted by : _____
Project Manager

CLEARANCE FOR CONTRACTUAL EMPLOYEE

Department /Project : _____

Date : _____

Name of Employee : _____ Date Hired : _____

Position : _____ Last day of work : _____

Section/Department : _____ Immediate Superior : _____

() Resignation () End of Contract () Completion of Specific Phase of Work () Termination

Instruction : Please facilitate the proper turn over/settlement of accountabilities. Route and secure from authorized signatory.

OFFICE/DEPT/SECTION	NATURE OF ACCOUNTABILITY	AMOUNT / REMARKS	SIGNATURE
Immediate Superior / Department Head	() Work Accountability () Files/ Document for Turn Over () Others, pls specify		
Accounting Department	() Unliquidated Cash Advances () Other/specify () SAP License		
Corporate Quality	() Files/ Document for Turn Over () Others, pls specify		
Human Resource	() ID / HMI Card Surrendered () Termination / Waiver & Quit Claim docs () Timekeeper () Exit Interview () Others, pls specify		
Corporate ESH Occupational Health Adviser	() Files/ Document for Turn Over () Medical Clearance/ Check Up		
Administration / Warehouse	() Tools () PPE () Others, pls specify		
Plant Division (if applicable)	() Plant Equipment () Others		
Human Resource - Payroll (Head Office)	() Others, pls specify		
ICT (Head Office)	() Cellphone () Laptop () Email allocation () Others, pls specify		

This clearance shall serve as acknowledgement of the termination/demobilization notice issued to me by the Project/Department and to attest my conformity to the settlement of the accountabilities indicated above by the different Project Offices/ Head Office Departments.

I hereby authorize the Company to deduct from my receivable final pay any amount of accountabilities as declared above.

Conforme : _____
(Printed Name Signature of Employee)

Noted by: _____
Division Head / Department Head

Approved by: _____
HR Head

RELEASE WAIVER AND QUITCLAIM

KNOW ALL MEN BY THESE PRESENTS:

- I, _____, Filipino, of legal age and with residence address at _____, do hereby depose and state under oath, that
- On _____ **First Balfour, Inc. ("First Balfour")**, engaged my services as a _____ on a project hire employment basis;
- On _____, I was separated from **First Balfour** due to _____;
- I acknowledged that I have received from **First Balfour** the total amount of _____ (P _____), Philippine Currency, net of taxes, in full and complete payment and settlement of all my claims, of any and all kinds, resulting from my said employment with **First Balfour**, as follows:

AMOUNT DETAILS:

CHECK NUMBER	AMOUNT	DATE

- In consideration of the amounts I received from **First Balfour**, I hereby release and forever discharge **First Balfour**, its Stockholders, Directors, Office Consultants and Agents, from any and all causes of action, sums of money, damages, claims and demands whatsoever in law or in equity which I, including my heirs, successors and assigns had, now have or shall have against First Balfour, its Stockholders, directors, officers, consultants and agents, arising wholly or in part from my professional and official relationship with First Balfour, including, but not limited to, unpaid wages, salaries, separation pay, holiday pay, subsidies, allowances, premium pay, 13th month pay, conversion of leave credits, whether arising from any company policy, company grant established practice;
- I also declare that I have no more cause of action against **First Balfour**, its stockholders, directors, officers, consultants, and agents, will not file a complaint against First Balfour, its stockholders, directors, officers, consultants, and agents, and that during the entire period of my Professional and official relationship with First Balfour, I received and was paid all compensation, benefits and privileges to which I was entitled under all laws, as well as under company policies of First Balfour by reason of such professional and official relationship, and if I hereafter find myself to have any entitlement to any amount the amounts hereinabove stated shall be a full satisfaction of any and all such undisclosed claims;
- I further declare that I have not been, or am not now, suffering from any work-connected illness or disability
- I shall not at any time or in any manner, either directly or indirectly, divulge or disclose or communicate to any person, firm or corporation OR use to the prejudice of First Balfour, its Stockholders, Directors, Officers and Consultants, any and all information affecting or relating to the business of First Balfour, manner of operation, its plan or other data which was disclosed to or acquired by me in the course of my professional or official relationship with First Balfour, except when such disclosure or communication is required by law or order of a court with competent jurisdiction.
- I finally hereby declare that I have read and understand all the contents of this document, and that the Release Waiver and Quitclaim hereby given is made willingly and voluntarily, and with full knowledge and understanding of all my rights under the law.
- IN WITNESS WHEREOF**, I have hereunto set my hands this _____ day of _____, 20____ at _____

Signature over Printed Name

Signed in the presence of:

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES)

) S.S.

BEFORE ME, a Notary Public for and in _____, this _____ of _____, 20____, personally appeared _____, with Community Tax Certificate No. _____ issued on _____ at _____, known to me and to me known to be the same person who executed the foregoing Quitclaim and Release, and acknowledged to me that the same is his/her free and voluntary act and deed.

WITNESS MY HAND AND SEAL on the date and the place above mentioned.

Doc. No. _____
Page No. _____
Book No. _____
Series of 200 _____.

NOTARY PUBLIC

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