

ISSUED FOR: ☐ OFFICIAL ACTIVITY ☐ PERSONAL REASONS

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| TIME OF DEPARTURE FROM THE OFFICE | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| TIME OF RETURN | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> OFFICIAL ACTIVITY: <i>(Please specify)</i> <div></div> <div></div> <div></div> | |
| <input type="checkbox"/> PERSONAL REASON: <i>(Please specify)</i> <div></div> <div></div> <div></div> | |
| PREPARED BY | |
| <div><div></div><div>Employee's signature over printed name</div><div>DATE:</div></div> | |
| ENDORSED BY | |
| <div><div></div><div>Immediate Superior signature over printed name</div><div>DATE:</div></div> | |
| APPROVED BY | |
| <div><div></div><div>HR Department signature over printed name</div><div>DATE:</div></div> | |

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