

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.

NAME OF STUDENT	Julian Oliver B. Moling		02-1151122		
COURSE CODE	Į.T. 199 F	SY/TERM ENROLLED 20	024-2025 /3rd ter		
and will be attached	Government of Biran / Brgy. 24pote	rtment/s for a minimum of, but not limited to	nddress of establishment) 496 hours.		
OMPANY REPRESENTA	TIVE	-,-,-			
	ANNE B. SARMIENTO man Resources Development Office		14		
Signature over Printed Name			Official Designation		
		chrd @ binon · gov · ph 1	chrd @binon.gov.ph / 049 - 513 - 5013		
	Department	Email and Contact Number/s			
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ignature over printed	name of Practicum Coordinator		Date		
"Y: (1) STUDENT; (2) HOST COI	PANY; (3) PRACTICUM COORDINATOR	The second secon	FORM OVPAA 0		