



**HOLY ANGEL UNIVERSITY**  
**SCHOOL OF COMPUTING**



**WAIVER**

I, DENZEL LALIC DELOS REYES, do hereby, in compliance to the requirements of the Practicum/Internship Program of the School of Computing voluntarily undergo actual office practice in a work from home arrangements and agree with the following terms and conditions:

1. That Holy Angel University and the abovementioned establishment will not be held liable for any injury/illness/damages as a result of my negligence that may occur during my Practicum Training period.
2. I will observe the rules of etiquette at all times. I will follow the rules and regulations pertinent to practicum training as discussed by the practicum coordinator and by the supervisor during orientation.
3. I am aware that any violation of the rules and regulation and any form of misdemeanor may result to disciplinary action depending upon the gravity of the said misdemeanor.
4. I will be responsible for my acts during my training in a work from home setup and deliver the outputs expected from me given by my supervisor

**CONFORME**

DENZEL L.. DELOS REYES, ( \_\_/\_\_/\_\_ )

**STUDENT TRAINEE**

*Printed Name, Signature & Date*

( \_\_/\_\_/\_\_ )

**SUPERVISOR**

*Printed Name, Signature & Date*

**APPROVALS**

FIRST NAME M. LAST NAME, ( \_\_/\_\_/\_\_ )

**STUDENT'S PARENTS**

*Printed Name, Signature & Date*

JEHAN D. BULANADI( \_\_/\_\_/\_\_ )

**PRACTICUM COORDINATOR**

*Printed Name, Signature & Date*

( \_\_/\_\_/\_\_ )

**SCHOOL DEAN**

*Printed Name, Signature & Date*

( \_\_/\_\_/\_\_ )

**DIRECTOR (COMPANY)**

*Printed Name, Signature & Date*