

#### CITY GOVERNMENT OF SAN PABLO

### PAMANTASAN NG LUNGSOD NG SAN PABLO



CHED Recognized Local College TESDA Recognized Programs

ALCU Commission on Accreditation – Level 1 Accredited Member, Association of Local Colleges and Universities Member, Local Colleges and Universities Athletic Association, Inc.

#### PRACTICUM PRE-APPLICATION FORM

NAME : LAMBIT, ERICKA D.

PROGRAM : BSIT - WGD

CONTACT NUMBER : \_\_09488830846

ADDRESS : 080 SITIO ACACIA BRGY. STA LUCIA DOLORES, QUEZON

EMAIL ADDRESS : lambitericka@gmail.com

NATURE OF TRAINING : ON-THE-JOB TRAINING

## **INSTITUTION/COMPANY'S INFORMATION**

SANGGUNIANG PANLUNGSOD NG

COMPANY NAME : SAN PABLO

7th FLOOR, CITY GOVERNANCE BUILDING,

ADDRESS : A. ST., BRGY V-A, SAN PABLO CITY

SECRETARIAL, RECORDS-KEEPING, ADMINISTRATIVE

SERVICES OFFERED : <u>ADMINISTRATIVE</u>

NAME OF SUPERVISOR : MR. RUFO D. MILLAR, MBA

CONTACT NO. : (049) 562-4733

EMAIL ADDRESS : \_\_sanggunian.sanpablo@gmail.com

# CONSENT

I have read the provided information, or it has been read to me, I have had the opportunity to ask questions about it and any questions I have been asked have been answered to my satisfaction. I understand that I will be given a copy of this form, and the coordinator/s will keep another copy on file.

I give my consent and voluntarily signed this form and authorized the coordinator/s to use my data entirely for educational purposes.

Conforme

Signature over Printed Name INSTITUTION/COMPANY

Signature over Printed Name TRAINEE/STUDENT