

STI COLLEGE LUCENA

Faculty Clearance Applicant Status Report \${ReportTitle}

Signatory Name: \${FirstName}, \${MiddleName},
\${LastName} or \${GeneratedBy}
Designation: \${AccountDesignation}
School Year: \${SchoolYear}

Sector Assigned: \${Sector}

Department Scope: \${DepartmentName}
Term: \${Semester}

Summary:

Total Approved:
\${TotalApproved}

Total Rejected:
\${TotalRejected}

Total Clearance Forms:
\${TotalForms}

Employee No.	Name	Employment Status	Department	Signatory Status	Date Signed
\${EmployeeNo}	\${LastName}, \${FirstName}, \${MiddleName}	\${EmploymentStatus}	\${Department}	\${ActionStatus}	\${DateSigned}