

# 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}