EXIT PERMIT (for non-teaching personnel)

Date: ________________

Name of Employee ____________________________________________

Department ____________________________________________________

Destination ____________________________________________________

Purpose ________________________________________________________

Time Out ________________ Time In ______________________

__________________________________________
Signature of Employee

__________________________________________
Signature of Head of Office

__________________________________________
Signature of Person Visited (if applicable)

1. use for short period / distance, w/ in a day / Legazpi & suburbs.
2. use for personal / official purposes.
3. accomplish in triplicate: (employee, office/dept., hrmo)
4. submit to HRMO at the end of each month thru the head of office.

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