



Republic of the Philippines
 Department of Education
 Region V
 SCHOOLS DIVISION OF MASBATE CITY

INDIVIDUAL PASS SLIP
For PERSONAL BUSINESS

Printed Name of Employee _____ Date _____

Permission is hereby requested to leave the Office premises during Office hours.

From _____ to _____
Intended time of departure Intended time of arrival

Purpose (Optional): _____
 _____.

 Signature of Employee

Approved by:

 (Head of Office/Authorized Representative)

Actual time of departure: _____
 Actual time of return: _____ Guard on Duty: _____



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