

UNIVERSITY OF THE PHILIPPINES BAGUIO
Governor Pack Road, Military Cut-off, Baguio City

Date: _____

Sir/Madam:

May I/we request permission to leave my/our office at _____ a.m./p.m. for the following reason/s:

() Personal : _____

() Official: _____

I will be back on _____ a.m./p.m.

SIGNATURE OVER PRINTED NAME

Recommending Approval:

Approved:

Immediate Supervisor / Head of Unit

PROF. EDNA N. GUECO
Head, HRDO

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