



Republic of the Philippines  
**DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT**  
**ISABELA**

Isabela DRRM Complex, Capitol Compound, Brgy. Alibagu, City of Ilagan, Isabela  
[dilg\\_isabela@yahoo.com](mailto:dilg_isabela@yahoo.com)

**COMPENSATORY TIME-OFF (CTO) APPLICATION FORM**

Name: _____ Signature: _____ Position: _____ Office: _____ Date of Filing: _____ No. of working hours applied for: _____ Inclusive date/s: _____	<b>FOR ADMINISTRATIVE SECTION USE ONLY</b>  Verified:  <u><b>MICHAEL ANGELO L. BENIGNO</b></u> Program Manager  Carded by: _____ Date: _____
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**COMPUTATION OF COMPENSATORY OVERTIME CREDITS (COC)**

Number of hours earned: \_\_\_\_\_ as of \_\_\_\_\_, 2024

Month/s	No. of Hours Earned	Date/s of CTO	No. of hours		Remarks
	<i>(Include monthly COCs earned within the current year)</i>		Used COCs	Remaining COCs	
					<i>(Indicate Department/Office Order No.)</i>

Prepared by: _____ Administrative Section Staff	Certified by:  <u><b>MICHAEL ANGELO L. BENIGNO</b></u> Program Manager
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**ACTION ON APPLICATION**

<input type="checkbox"/> Approved for _____ hours	<input type="checkbox"/> Disapproved due to _____
<u><b>ENGR. CORAZON D. TORIBIO, CESO V</b></u> Provincial Director	

Notes:

1. The COCs cannot be used to offset undertime/s or tardiness incurred by the employee during regular working days.
2. Each employee may accrue not more than forty (40) hours of COCs in a month. In no instance, however, shall the unexpected balance exceed one hundred twenty (120) hours.
3. The CTO may be availed of in blocks of hour (4) or eight (8) hours.
4. The employee may use the CTO continuously up to a maximum of five (5) consecutive days per single availment, or on staggered basis within the year.
5. The employee must first obtain approval from the head of office/ authorized official regarding the schedule of availment of CTO.



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6. Attach Department/Office order authorizing the rendition of overtime services.