Timestamp	Email Address	Full Name	Mobile Number	Position	Please choose the type of leave	Leave Start Date	Leave End Date	Please upload the softcopy of your leave application	Please upload the softcopy of the attachments for your leave application (optional)	Recommending Approval Department Head	Approval by the Local Chief Executive	Control No.	Remarks
11/4/2024 13:08:57	ol.pudtolmcr@gmail.com	JEN-LEE L PACRAY	09774851255	RO1/ACTING MCR	Sick Leave	11/4/2024	11/4/2024	https://drive.google.com/open?id=1eQXGG7bcTGw	https://drive.google.com/				
11/4/2024 13:11:10	ol.pudtolmcr@gmail.com	JEN-LEE L PACRAY	09774851255	RO1/ACTING MCR	Sick Leave	10/10/2024	10/10/2024	https://drive.google.com/open?id=1cMqpzj7UA4psvl		Approved	Approved		
11/4/2024 13:13:39	ol.pudtolmcr@gmail.com	JEN-LEE L PACRAY	09774851255	RO1/Acting MCR	Sick Leave	10/3/2024	10/3/2024	https://drive.google.com/open?id=1-qdsAiXjhnWgPz		Approved	Approved		