

UNIVERSITY OF THE PHILIPPINES
MINDANAO

CERTIFICATE OF SERVICE

For the Month of _____, _____

Name _____
Position _____
College/School of _____

Activities other than teaching such as Research, etc.	Approximate number of hrs/wk
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I hereby certify _____

(Signature)

Attested:

Head, Department

Approved:

Dean/Director

NOTE: Suggested statement, called for in the certificate, to be written in longhand:

“I hereby certify, upon my honor, that I have rendered full services for the month of _____, _____, except (in case of absences) on the following days, application for leave for which had been duly made

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