\_\_\_\_\_\_\_\_\_

Date

**VICTORIA V. GAZO, PhD., CESO V**

Schools Division Superintendent

Malaybalay City Division

Casisang, Malaybalay City

Maám:

The undersigned respectfully requests to avail a **Compensatory-Time-Off (CTO)** on (Date) to (reason).

Herewith is the record of COC earned as of **(Date of attached COC)**.

Anticipating for your approval on this request.

Very truly yours,

**\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Position)

Certification as to the availability of COCs

As of **\_\_\_\_\_\_\_\_\_\_\_\_\_.**

|  |  |  |
| --- | --- | --- |
| COCs Earned | Used COCs | Remaining Balance of COCSs |
|  |  |  |
|  |  |  |

RECOMMENDING APPROVAL:

**GUIA MA. G. VILLAHERMOSA\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_**

AO IV-Personnel  **Date** Immediate Supervisor **Date**

APPROVED:

**VICTORIA V. GAZO, PhD, CESO V**

Schools Division Superintendent