



OVCA FORM 102B: INDIVIDUAL INSTRUCTOR/TEACHER SCHEDULE (SHSSHS)

Name of Instructor/Professor: _____
SURNAME FIRST NAME M.I.

Full Time Permanent Full Time Probationary Full Time Fixed Part Time

Take note of the following in accomplishing this form:

1. Write the course and the room assignment in each box slated for teaching hour/s
2. Write CH (Consultation Hour), SC (Service to Committee/s), AW (Administrative Work), RW (Research Work), and CS (Community Service) and the room/office in each box slated for consultation/service/research hours.
3. Shade fully the boxes which are not used for teaching/consultation/ service to committee/s administrative work/ research/community service.

TIME/DAY	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:45-8:00	CLASS ASSEMBLY Advisory Class:					
8:00-9:00						
9:00-10:00						
10:00-10:15	AM RECESS					
10:15-11:15						
11:15-12:15						
12:15-1:00	LUNCH					
1:00-2:00						
2:00-3:00						
3:00-3:15	PM RECESS					
3:15-4:15						
4:15-5:15						

Teaching Load: _____ Units	
No. of Teaching Hrs./Week	_____
No. of Consultation Hrs./Week	_____
No. of Hrs. for Service to Committee/s /Week	_____
No. of Hrs. for Administrative Work/Week	_____
No. of Hrs. for Research Work/Week	_____
No. of Hrs. for Community Service/Week (Specific Involvement)	_____
Total No. of Hours/Week	_____

CONFORME:

Signature of Instructor / Teacher

ENDORSED:

Academics Coordinator

RECOMMENDED:

Dean

APPROVED:

Juanito O. Cabanias, LPT, PhD
Vice Chancellor for Academics

Note: Please accomplish in four (4) copies: Faculty Member, Department Chair/Program Director, Dean, File

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