

Enclosure No. 2 to DepEd Order No. 011, s. 2020

OFFICE/SCHOOL/CLC WORKWEEK PLAN

To the Personnel Division/Section/Unit:

In compliance with the DepEd Order No. 011, s. 2020, the **(DIVISION/OFFICE)** is hereby submitting the workweek plan for the period: **June 22-26, 2020.**

Name of Personnel/ Position	Pre-existing Health Condition and/or disease	Alternative Work Arrangement*, Time and Period					Target Deliverables for the Week	Signature
		Mon	Tue	Wed	Thu	Fri		
Ex. Juan del Mundo PDO III	None	Skeleton WF	WFH	Skeleton WF	WFH	Skeleton WF	1. Submit to Acctg. Division Pending TEVs 2. Receive incoming documents 3. Submit report on xxxxxx 4. Release documents to various offices	
		8AM-3PM	8AM-5PM	8AM-3PM	8AM-5PM	8AM-3PM		
Ex. Maria Juana dela Cruz	Pregnant	Skeleton WF	WFH	Skeleton WF	WFH	Skeleton WF	1. Draft Memo re: xxxxxx 2. Prepare draft policy on xxx 3. Review related policies and references for xxx	
		8AM-5PM	8AM-5PM	8AM-5PM	8AM-5PM	8AM-5PM		
Ex. Luzviminda Reyes	None	2-week Shift (Week 1) Skeleton WF	2-week Shift (Week 1) Skel	2-week Shift (Week 1) Skel	2-week Shift (Week 1) Skel	2-week Shift (Week 1) Skel		
		8AM-5PM	8AM-5PM	8AM-5PM	8AM-5PM	8AM-5PM		

In consideration of the situation of the following personnel who will not be able to perform and submit their Individual Workweek Accomplishment Report for reasons as stated, the undersigned request the payment of their salaries and benefits for the period of (Month-Date, 2020).

Name of Personnel	Position	Pre-existing Health Condition and/or disease (if applicable)	Authorized Official or Personnel to serve as Skeleton Workforce	Justifiable Reason/s Not to be Able to Perform Tasks at Home	Signature
Ex. Jose Reyes	Utility Worker	None	No	<i>Assigned to tasks that are dependent only on the office equipment and materials available in the office premises but do not belong to the identified essential or critical services.</i>	
Ex. Julian Santos	Admin Aide	None	No	<i>Assigned to tasks that are dependent only on the normal condition in the office such as receiving and releasing of (hard copies) documents but do not belong to the identified essential or critical services.</i>	

Submitted by:

Approved by:

(Name & Signature of Head of Functional Office)

(Name & Signature of Head of Office)

Date:

Date:

Enclosure No. 3 to DepEd Order No. 011, s. 2020

INDIVIDUAL DAILY LOG AND ACCOMPLISHMENT REPORT

Name of **Personnel**: Juan del Mundo

Division:

Bureau/Service:

Date/s Covered:

Alternative Work Arrangement <i>(*Indicate if 2-week shift)</i>	Date and Actual Time logs	Actual Accomplishments
<i>Skeleton Workforce</i>	<i>5/16/2020 Time-in: 7:30AM Time out: 5:00 PM</i>	<i>Process Liquidation Report for Workshop AA Submit to Acctg. Division Pending TEVs Receive incoming documents</i>
<i>Work-from-Home</i>	<i>5/17/2020 Time-in: 7:00AM Time out: 6:00 PM</i>	<i>Facilitate meeting with Office AA via MS Teams Submit report on xxxxxx</i>
<i>Skeleton Workforce</i>	<i>5/18/2020 Time-in: 7:50AM Time out: 5:00 PM</i>	<i>Receive incoming documents</i>
<i>Work-from-Home</i>	<i>5/19/2020 Time-in: 7:30AM Time out: 7:00 PM</i>	<i>Draft Memo re: xxxxxx</i>
<i>Skeleton Workforce</i>	<i>5/20/2020 Time-in: 8:00AM Time out: 5:00 PM</i>	<i>Submit report on xxxxxx</i>

Submitted by:

Approved by:

(Name & Signature of Personnel)

(Name & Signature of Head of Office)

Date:

Date: