**DEFICIENCY REPORT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dept:** |  |  **Semester:** |  |  |
|  |
| **Staff Name:** |  | **ID No:** |  |  |
|  |
|  |
| **Part I: Completed by the Deputy Office/OR The Department Chairman Concerned** |
| **Type of Deficiency** |  |
|  |  |  |
|  |  |
|  |  |
|  |  |
| **Deficiency Status** |  |
|  | [ ]  | **1st Deficiency** | [ ]  | **2nd Deficiency** | [ ]  | **Last Deficiency** |
|  |
|  |  |  |
| **Location** |  |
|  |  |
| **Day & Date** |  | **Time/ Period** |  |
|  |
|  |
| **Part II: Completed by the Concerned Staff** |
| **Staff Justification:** |  |
|  |
|  |
| Signature:  |  |  | Date: |  |  |
|  |  |
|  |
| **Part III: Completed by the Concerned Chairman/ Director, ELC** |
| **Chairman Justification:** |  |
|  |
| Signature:  |  |  | Date: |  |  |
|  |  |
|  |
| **Part IV: Completed by the JIC Deputy, Education & Training Affairs OR Chairman** |
|  |
|  | [ ]  | **The Justification is Accepted** |  |
|  | [ ]  | **Rejected and the Following Disciplinary Action Should Be Taken:** |
|  |
|  | [ ]  | **Reminder** |  |
|  | [ ]  | **Verbal Warning** |  |
|  | [ ]  | **Letter of Advice** |  |
|  | [ ]  | **Deficiency Report** |  |
|  | [ ]  | **Warning Letter** |  |
|  | [ ]  | **Cancellation of Prep. Hours** |  |
|  | [ ]  | **Others:** |  |  |
|  | (Please state) |  |

|  |
| --- |
| **Part V: The Approvals** |
| 1. **For All Faculty Members & Admin**
 |  |  |  |
| 1. **Staff:**

JIC Deputy, Education & Training Affairs: |  |  |  |
|  **Signature:**  |  | **Date:** |  |  |  |
| 1. **For Chairmen/Directors:**
 |  |  |  |
| Managing Director: |  |  |  |  |
| **Signature:** |  | **Date:** |  |  |  |
|  |  |  |  |

 cc: Managing Director

 Dept. Chairman

 File