**DIRECCION METROPOLITANA DE RECURSOS HUMANOS**

**FORMULARIO PARA EL CONTROL DE ASISTENCIA**

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| MES | JULIO | AÑO | 2023 |

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| DEPENDENCIA DONDE LABORA: SECRETARÍA GENERAL DE COORDINACION TERRIOTRIAL Y PARTICIPACIÓN CIUDADANA | CARGO: FUNCIONARIA DIRECTIVA 2 |
| APELLIDOS Y NOMBRES: VANCE MAFLA CARINA ISABEL | CEDULA DE CIUDADANIA: 1707355986 |

**SEMANA # 1**

|  |  |  |  |  |  |  |  |  |  |  |
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| **DIAS** | **FECHA** | **MAÑANA** | | **ALMUERZO** | | | | **TARDE** | |  |
| **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **OBSERVACIONES** |
| **LUNES** | 03/07/2023 | 08H00 |  |  |  |  |  | 20H10 |  |  |
| **MARTES** |  |  |  |  |  |  |  |  |  |  |
| **MIÉRCOLES** |  |  |  |  |  |  |  |  |  |  |
| **JUEVES** | 06/07/2023 |  |  |  |  |  |  | 18H50 |  |  |
| **VIERNES** | 07/07/2023 |  |  | 13H00 |  | 13H30 |  |  |  |  |
| **SABADO** |  |  |  |  |  |  |  |  |  |  |
| **DOMINGO** |  |  |  |  |  |  |  |  |  |  |

**SEMANA # 2**

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| **DIAS** | **FECHA** | **MAÑANA** | | **ALMUERZO** | | | | **TARDE** | |  |
| **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **OBSERVACIONES** |
| **LUNES** | 10/07/2023 |  |  |  |  | 15H30 |  |  |  |  |
| **MARTES** |  |  |  |  |  |  |  |  |  |  |
| **MIÉRCOLES** | 12/07/2023 |  |  | 13H00 |  | 13H30 |  |  |  |  |
| **JUEVES** |  |  |  |  |  |  |  |  |  |  |
| **VIERNES** |  |  |  |  |  |  |  |  |  |  |
| **SABADO** |  |  |  |  |  |  |  |  |  |  |
| **DOMINGO** |  |  |  |  |  |  |  |  |  |  |

**SEMANA # 3**

|  |  |  |  |  |  |  |  |  |  |  |
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| **DIAS** | **FECHA** | **MAÑANA** | | **ALMUERZO** | | | | **TARDE** | |  |
| **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **OBSERVACIONES** |
| **LUNES** | 17/07/2023 |  |  |  |  | 14H20 |  |  |  |  |
| **MARTES** |  |  |  |  |  |  |  |  |  |  |
| **MIÉRCOLES** |  |  |  |  |  |  |  |  |  |  |
| **JUEVES** |  |  |  |  |  |  |  |  |  |  |
| **VIERNES** |  |  |  |  |  |  |  |  |  |  |
| **SABADO** |  |  |  |  |  |  |  |  |  |  |
| **DOMINGO** |  |  |  |  |  |  |  |  |  |  |

**SEMANA # 4**

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| **DIAS** | **FECHA** | **MAÑANA** | | **ALMUERZO** | | | | **TARDE** | |  |
| **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **OBSERVACIONES** |
| **LUNES** |  |  |  |  |  |  |  |  |  |  |
| **MARTES** |  |  |  |  |  |  |  |  |  |  |
| **MIÉRCOLES** |  |  |  |  |  |  |  |  |  |  |
| **JUEVES** | 27/07/2023 |  |  | 13H00 |  | 13H30 |  |  |  |  |
| **VIERNES** |  |  |  |  |  |  |  |  |  |  |
| **SABADO** |  |  |  |  |  |  |  |  |  |  |
| **DOMINGO** |  |  |  |  |  |  |  |  |  |  |

**SEMANA # 5**

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| **DIAS** | **FECHA** | **MAÑANA** | | **ALMUERZO** | | | | **TARDE** | |  |
| **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** | **H. ENTRADA** | **FIRMA** | **H. SALIDA** | **FIRMA** |  |
| **LUNES** | 31/07/2023 |  |  | 13H00 |  | 13H30 |  |  |  |  |
| **MARTES** |  |  |  |  |  |  |  |  |  |  |
| **MIÉRCOLES** |  |  |  |  |  |  |  |  |  |  |
| **JUEVES** |  |  |  |  |  |  |  |  |  |  |
| **VIERNES** |  |  |  |  |  |  |  |  |  |  |
| **SABADO** |  |  |  |  |  |  |  |  |  |  |
| **DOMINGO** |  |  |  |  |  |  |  |  |  |  |

**DECLARO:** que la firma registrada en el presente formulario es igual a la constante en mi cédula de identidad, por lo que me responsabilizo por cualquier falsedad, inexactitud o adulteración comprobada. Cualquiera de las situaciones dará lugar a las sanciones que correspondan.

**Nota:** Las firmas consignadas en este registro, son de exclusiva responsabilidad del jefe inmediato; conforme las Disposiciones de la Ley Orgánica de la Contraloría General del Estado y su respectivo Reglamento.

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| **ELABORADO POR:** | **APROBADO POR:** |
|  |  |
|  |  |
| --------------------------------------------------  **FIRMA DEL FUNCIONARIO** | **------------------------------------------------------JEFE INMEDIATO** |
|  |  |