

DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF AIR, NOISE & HAZARDOUS MATERIALS
TRAINING / CERTIFICATION & LEAD UNIT

DATE: WEEK ENDING: 25th
MONTH/YEAR: May 2001

SECTION: ASBESTOS & LEAD PROGRAM
DIST. # 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

TCU PART-TIMER

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
	8:30 AM		OUT	in	4:30 PM		
MELENDRES, LEONOR							
MONDAY	8:30	Leonor Melendres	1:00	2:00	4:30	Leonor Melendres	7 Hrs
TUESDAY	8:50	Leonor Melendres	1:30	2:00	4:30	Leonor Melendres	Train delay R-train L. Radner 7 Hrs
WEDNESDAY	8:30	Leonor Melendres	1:00	2:00	4:30	Leonor Melendres	7 Hrs
THURSDAY	8:50	Leonor Melendres	/	/	12:50	Leonor Melendres	14 Hrs
FRIDAY							

Supervisor's initials
required for other than
Scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor: 

DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT
PART-TIMERS

WEEK OF May 21- May 25, 2001

SECTION ASBESTOS AND LEAD CONTROL PROGRAM

DIST. # 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME		SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME	ARR.		OUT	IN			
MONDAY							
ROSALBA GILIBERTI	9:05	R. Gilberti	11	11	1:05	R. Gilberti	4/hrs
TUESDAY							
ROSALBA GILIBERTI	9:15	R. Gilberti	1:15	2:00	5:00	R. Gilberti	7 1/2 hrs
WEDNESDAY							
ROSALBA GILIBERTI	off						
THURSDAY	9:05	R. Gilberti	1:15	2:00	5:00	R. Gilberti	7 hrs
ROSALBA GILIBERTI							
FRIDAY							
ROSALBA GILIBERTI	9:30	R. Gilberti	1:00	1:30	5:00	R. Gilberti	7 hrs

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY
Supervisor [Signature]
A

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DAY Monday

SECTION ASBESTOS

DATE 5/21/01

DIST.# 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

**ENFORCEMENT
PART-TIME
8:00AM to 4:00PM**

[illegible]

Supervisor's initials required for other than scheduled work hours.

Certification of Accuracy

Supervisor

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DAY Tuesday

SECTION ASBESTOS

DATE 5/22/04

DIST.# 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

**ENFORCEMENT
PART-TIME
8:00AM to 4:00PM**

[illegible]

Supervisor's initials required for other than scheduled work hours.

Certification of Accuracy

Supervisor

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DAY Thursday SECTION ASBESTOS
DATE 5/24/01 DIST.# 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

**ENFORCEMENT
PART-TIME
8:00AM to 4:00PM**

[illegible]

Supervisor's initials required for other than scheduled work hours.

Certification of Accuracy

Supervisor

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DAY Friday SECTION ASBESTOS
DATE 5/25/01 DIST.# 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

**ENFORCEMENT
PART-TIME
8:00AM to 4:00PM**

[illegible]

Supervisor's initials required for other than scheduled work hours.

Certification of Accuracy

Supervisor

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL COMPLIANCE**

WKENDING May 21 - May 25, 2001 UNIT: ASBESTOS

DIST#: 5000 TITLE: ENGR. WORK STUDY

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR	SIGNATURE	LUNCH OUT IN	DEP	SIGNATURE	REMARKS
MONDAY / /						
BEDIA, SARAY	9 ³⁰	<i>[Signature]</i>	12 ³⁰ 1 ⁰⁰	5 ⁰⁰	<i>[Signature]</i>	<i>Thurs per</i>
TUESDAY / /						
BEDIA, SARAY	9 ⁰⁰	<i>[Signature]</i>	12 ⁰⁰ 1 ⁰⁰	5 ³⁰	<i>[Signature]</i>	
WEDNESDAY / /						
BEDIA, SARAY		<i>[Signature]</i>				<i>will be late</i>
THURSDAY / /						
BEDIA, SARAY		<i>[Signature]</i>				
FRIDAY / /						
BEDIA, SARAY		<i>[Signature]</i>				

Supervisor's initials required for other than scheduled work hours.

Certification of Accuracy

[Signature]
Supervisor's Signature

[Signature]

DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT
CO-OP PROGRAM

WEEK OF May 21 - May 25, 2001 SECTION ASBESTOS AND LEAD CONTROL PROGRAM
DIST. # 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME		SIGNATURE	LUNCH	DEP.	SIGNATURE	REMARKS
FULL TIME	ARR.		OUT	IN		
MONDAY	8:30 A.M.	<i>Yves Nelson</i>	12:05 P.M.	1:05 P.M.	4:30 P.M.	<i>Yves Nelson</i>
YVES NELSON	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.		
TUESDAY	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>
YVES NELSON	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>
WEDNESDAY	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>
YVES NELSON	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>
THURSDAY	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:00 P.M.	<i>Yves Nelson</i>
YVES NELSON	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:00 P.M.	<i>Yves Nelson</i>
FRIDAY	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>
YVES NELSON	8:30 A.M.	<i>Yves Nelson</i>	12:00 P.M.	1:00 P.M.	4:30 P.M.	<i>Yves Nelson</i>

Supervisor's initials required for other than scheduled work hours.

Y

CERTIFICATION OF ACCURACY
Supervisor *[Signature]*

DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT
CO-OP PROGRAM

WEEK OF May 21 - May 25, 2001

SECTION ASBESTOS AND LEAD CONTROL PROGRAM

DIST. # 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME		SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME	ARR.		OUT	IN			
MONDAY							
MINA MAGAR	8:22	Munoz	12:15	1:15	4:24	Munoz	Thm pl
TUESDAY							
MINA MAGAR	10:00	Munoz	12:05	1:05	4:00	Munoz	Thm pl
WEDNESDAY							
MINA MAGAR	9:05	Munoz	1:00	2:00	4:00	Munoz	6 hrs pl
THURSDAY							
MINA MAGAR	8:25	Munoz	12:00	1:00	4:25	Munoz	Thm pl
FRIDAY							
MINA MAGAR	8:36	Munoz	1:00	2:00	4:17	Munoz	6 1/2 hrs pl

Supervisor's initials
required for other than
scheduled work hours.

CERTIFICATION OF ACCURACY
Supervisor *[Signature]*

TJ