



Republic of the Philippines
VISAYAS STATE UNIVERSITY
Visca, Baybay City, Leyte

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT	2. NAME : (Last) (First) (Middle)													
ISRDS	GALGO, CHRISTOPHER JR. RATILLA													
3. DATE OF FILING <u>June 13, 2022</u>	4. POSITION <u>Instructor I</u>	5. SALARY _____												
6. DETAILS OF APPLICATION														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;">6.A TYPE OF LEAVE TO BE AVAILED OF <div style="margin-top: 5px;"><input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> Maternity Leave (R.A. No. 11210 / IRR issued by CSC, DOLE and SSS)</div><div style="margin-top: 5px;"><input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended)</div><div style="margin-top: 5px;"><input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> Solo Parent Leave (R.A. No. 8972 / CSC MC No. 8, s. 2004)</div><div style="margin-top: 5px;"><input type="checkbox"/> Study Leave (Sec. 68, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> 10-Day VAWC Leave (R.A. No. 9282 / CSC MC No. 15, s. 2005)</div><div style="margin-top: 5px;"><input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</div><div style="margin-top: 5px;"><input type="checkbox"/> Special Leave Benefits for Women (R.A. No. 9710 / CSC MC No. 25, s. 2010)</div><div style="margin-top: 5px;"><input type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended)</div><div style="margin-top: 5px;"><input type="checkbox"/> Adoption Leave (R.A. No. 8552)</div><div style="margin-top: 10px;">Others: <input checked="" type="checkbox"/> Terminal leave</div></div><div style="width: 48%;">6.B DETAILS OF LEAVE <div style="margin-top: 5px;"><i>In case of Vacation/Special Privilege Leave:</i> Within the Philippines _____ Abroad (Specify) _____</div><div style="margin-top: 5px;"><i>In case of Sick Leave:</i> In Hospital (Specify Illness) _____ Out Patient (Specify Illness) _____</div><div style="margin-top: 10px;"><i>In case of Special Leave Benefits for Women:</i> (Specify Illness) _____</div><div style="margin-top: 10px;"><i>In case of Study Leave:</i> Completion of Master's Degree BAR/Board Examination Review <i>Other purpose:</i> <input checked="" type="checkbox"/> Monetization of Leave Credits <input checked="" type="checkbox"/> Terminal Leave</div></div></div>														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;">6.C NUMBER OF WORKING DAYS APPLIED FOR INCLUSIVE DATES </div><div style="width: 48%;">6.D COMMUTATION <div style="margin-top: 5px;"><input type="checkbox"/> Not Requested</div><div style="margin-top: 5px;"><input checked="" type="checkbox"/> Requested</div><div style="margin-top: 10px; text-align: center;"> (Signature of Applicant)</div></div></div>														
7. DETAILS OF ACTION ON APPLICATION														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;">7.A CERTIFICATION OF LEAVE CREDITS As of _____<table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"><tr><th></th><th>Vacation Leave</th><th>Sick Leave</th></tr><tr><td>Total Earned</td><td></td><td></td></tr><tr><td>Less this application</td><td></td><td></td></tr><tr><td>Balance</td><td></td><td></td></tr></table><div style="margin-top: 10px; text-align: center;">REGINA BIBERA, Adm. Officer II (Authorized Officer)</div></div><div style="width: 48%;">7.B RECOMMENDATION <div style="margin-top: 5px;"><input type="checkbox"/> For approval</div><div style="margin-top: 5px;"><input type="checkbox"/> For disapproval due to _____</div><div style="margin-top: 10px; text-align: center;"> LILIAN B. NUÑEZ (Authorized Officer)</div></div></div>				Vacation Leave	Sick Leave	Total Earned			Less this application			Balance		
	Vacation Leave	Sick Leave												
Total Earned														
Less this application														
Balance														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;">7.C APPROVED FOR: <div style="margin-top: 5px;"><input type="checkbox"/> days with pay</div><div style="margin-top: 5px;"><input type="checkbox"/> days without pay</div><div style="margin-top: 5px;"><input type="checkbox"/> others (Specify)</div></div><div style="width: 48%;">7.D DISAPPROVED DUE TO: </div></div>														
EDGARDO E. TULIN President (Authorized Official)														