



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

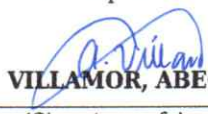
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**APPLICATION FOR LEAVE**


|                          |                     |                     |                |
|--------------------------|---------------------|---------------------|----------------|
| 1. OFFICE/DEPT./DIVISION | Name (Last)         | (First)             | (Middle)       |
| <b>NARC</b>              | <b>Villamor</b>     | <b>Abegail</b>      | <b>Badilla</b> |
| 3. DATE OF FILING        | 4. POSITION         | 5. SALARY (Monthly) |                |
| <b>11/14/2022</b>        | <b>Science Aide</b> |                     |                |

**6. DETAILS OF APPLICATION**

|   |   |
|---|---|
| <b>6.a TYPE OF LEAVE TO BE AVAILED OF:</b><br><input type="checkbox"/> Adoption<br><input type="checkbox"/> Mandatory/Force<br><input type="checkbox"/> Maternity<br><input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver<br><input type="checkbox"/> Maternity - additional 15 days for single mother<br><input type="checkbox"/> Monetization<br><input type="checkbox"/> Parental (Solo Parent)<br><input type="checkbox"/> Paternity<br><input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)<br><input type="checkbox"/> Sabbatical<br><input checked="" type="checkbox"/> Sick<br><input type="checkbox"/> Special Emergency (Calamity)<br><input type="checkbox"/> Special Leave Benefits for women<br><input type="checkbox"/> Special Leave Privilege<br><input type="checkbox"/> Study<br><input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)<br><input type="checkbox"/> Vacation<br><br>Others: _____ | <b>6.b DETAILS OF LEAVE:</b><br><br>In case of vacation/Special Privilege leave:<br><input type="checkbox"/> Within the Philippines :<br><input type="checkbox"/> Abroad (Pls. Specify) :<br><br>In case of Sick leave:<br><input type="checkbox"/> In Hospital (Pls. Specify) :<br><input checked="" type="checkbox"/> Out Patient (Pls. Specify) : <u>Brgy. Pangasugan, Baybay City</u><br><br>In case of Special Leave Benefits for Women:<br>(Specify illness)<br><br>In case of Study leave:<br><input type="checkbox"/> BAR/Board Examination Review<br><input type="checkbox"/> Completion of Master's Degree<br><input type="checkbox"/> Completion of Doctorate Degree<br><input type="checkbox"/> Completion of PHD Degree<br><br>Other purpose:<br><input type="checkbox"/> Monetization of Leave Credits<br><input type="checkbox"/> Terminal Leave |
|---|---|

|  |   |
|--|---|
| <b>6.c NUMBER OF WORKING DAYS APPLIED FOR</b><br><br><u>1 day</u><br>Inclusive Dates<br><br><u>11/11/2022 - 11/11/2022</u> | <b>6.d COMMUTATION</b><br><input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested<br><br><br><b>VILLAMOR, ABEGAIL B.</b><br>(Signature of Applicant) |
|--|---|

**7. DETAILS OF ACTION ON APPLICATION**

| <b>7.a CERTIFICATION OF LEAVE CREDITS</b><br>AS of: <u>November 2022</u><br><table border="1"> <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>1</td> </tr> <tr> <td>Balance</td> <td></td> <td></td> </tr> </table><br><b>REGINA C. BIBERA</b><br>Office of the Head of Payroll and Leave Benefits |  | Vacation Leave | Sick Leave | Total Earned |  |  | Less this Application |  | 1 | Balance |  |  | <b>7.b RECOMMENDATION:</b><br><input checked="" type="checkbox"/> For Approval<br><input type="checkbox"/> For Disapproval due to:<br><br><br><b>ROMEL B. ARMECIN</b><br>National Abaca Research Center |
|---|--|----------------|------------|--------------|--|--|-----------------------|--|---|---------|--|--|--|
|   | Vacation Leave                             | Sick Leave     |            |              |  |  |                       |  |   |         |  |  |  |
| Total Earned  |  |                |            |              |  |  |                       |  |   |         |  |  |  |
| Less this Application   |  | 1              |            |              |  |  |                       |  |   |         |  |  |  |
| Balance   |  |                |            |              |  |  |                       |  |   |         |  |  |  |
| <b>7.c APPROVED FOR:</b><br>_____ day(s) with pay <u>1</u> day(s) without pay<br>Others (Specify): _____  | <b>7.d DISAPPROVED due to:</b><br><br><br> |                |            |              |  |  |                       |  |   |         |  |  |  |

**EDGARDO E. TULIN**
 (Printed Name and Signature)  
 University President