

Civil Service Form 48

DAILY TIME RECORD**GORNE, NELLO D.**

(NAME)

For the month of

June 1 - 30, 2022

Official hours for arrival and departure

8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-WED	7:58	12:00	12:55	5:22		8hrs
2-THU	7:56	12:04	12:57	5:02		8hrs
3-FRI	7:56	12:02	12:48	5:21		8hrs
4-SAT						Off
5-SUN						Off
6-MON	7:57	12:02	1:00	5:17		8hrs
7-TUE	7:56	12:03	12:51	5:32		8hrs
8-WED	7:56	12:05	12:56	5:27	3hrs 51mins	4hrs 9mins
9-THU	7:57	12:00	12:54	5:07		8hrs
10-FRI	7:56	12:06	12:57	5:03		8hrs
11-SAT						Off
12-SUN						Off
13-MON	7:52	12:05	12:50	5:05	3hrs 45mins	4hrs 15mins
14-TUE	7:56	12:03	12:45	5:10		8hrs
15-WED	7:56	12:03	12:45	5:03		8hrs
16-THU	7:56	12:03	12:56	5:06		8hrs
17-FRI	7:57	12:03	12:53	5:30		8hrs
18-SAT						Off
19-SUN						Off
20-MON	7:51	12:05	12:48	5:13		8hrs
21-TUE	7:55	12:07	12:14	5:21		8hrs
22-WED	7:53	12:12	12:55	5:16		8hrs
23-THU	ON LEAVE					Absent
24-FRI	ON LEAVE					Absent
25-SAT						Off
26-SUN						Off
27-MON	8:00	12:05	12:54	5:15		8hrs
28-TUE	8:00	12:02	12:47	5:14		8hrs
29-WED	8:00	12:00	1:00	5:00	2 hrs	Absent
30-THU	8:00	12:00	1:00	5:00		Absent

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

NELLO D. GORNE

VERIFIED as to prescribed office hours

RUTH O. ESCASINASDepartment Head
Department of Agronomy

Philippines

E UNIVERSITY

City, Leyte

Stamp of Date of Receipt

FOR LEAVE

(First)	(Middle)
Nello	Degracia
	5. SALARY (Monthly)
Professor IV	

APPLICATION

6.b DETAILS OF LEAVE:
In case of vacation/Special Privilege leave:
<input type="checkbox"/> Within the Philippines :
<input type="checkbox"/> Abroad (Pls. Specify) :
In case of Sick leave:
<input type="checkbox"/> In Hospital (Pls. Specify) :
<input type="checkbox"/> Out Patient (Pls. Specify) :
In case of Special Leave Benefits for Women:
(Specify Illness)
In case of Study leave:
<input type="checkbox"/> Completion of Master's Degree
<input type="checkbox"/> BAR/Board Examination Review
Other purpose:
<input type="checkbox"/> Monetization of Leave Credits
<input type="checkbox"/> Terminal Leave
6.d COMMUTATION
<input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested
GORNE, NELLO D.
(Signature of Applicant)

ON APPLICATION

7.b RECOMMENDATION:
<input type="checkbox"/> For Approval
<input type="checkbox"/> For Disapproval due to:
RUTH O. ESCASINAS
Department of Agronomy
7.d DISAPPROVED due to:
E. TULIN
(Signature)
President

LA-2022-0621-39917



Republic of the Philippines

VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)	(Middle)												
DA	Gorne	Nello	Degracia												
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)												
06/20/2022	Assistant Professor IV														
6. DETAILS OF APPLICATION															
6.a TYPE OF LEAVE TO BE AVAILED OF: <input type="checkbox"/> Adoption <input checked="" type="checkbox"/> Mandatory/Force <input type="checkbox"/> Maternity <input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver <input type="checkbox"/> Maternity - additional 15 days for single mother <input type="checkbox"/> Monetization <input type="checkbox"/> Parental (Solo Parent) <input type="checkbox"/> Paternity <input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Sabbatical <input type="checkbox"/> Sick <input type="checkbox"/> Special Emergency (Calamity) <input type="checkbox"/> Special Leave Benefits for women <input type="checkbox"/> Special Leave Privilege <input type="checkbox"/> Study <input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Vacation Others: _____		6.b DETAILS OF LEAVE: In case of vacation/Special Privilege leave: <input type="checkbox"/> Within the Philippines : <input type="checkbox"/> Abroad (Pls. Specify) : In case of Sick leave: <input type="checkbox"/> In Hospital (Pls. Specify) : <input type="checkbox"/> Out Patient (Pls. Specify) : In case of Special Leave Benefits for Women: (Specify Illness) In case of Study leave: <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> BAR/Board Examination Review Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave													
6.c NUMBER OF WORKING DAYS APPLIED FOR <u>1 day</u> Inclusive Dates 06/23/2022 - 06/23/2022		6.d COMMUTATION <input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested <div style="text-align: center;"> GORNE, NELLO D. (Signature of Applicant) </div>													
7. DETAILS OF ACTION ON APPLICATION															
7.a CERTIFICATION OF LEAVE CREDITS AS of: <u>June 2022</u> <table border="1" style="width: 100%;"> <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="text-align: center;"> REGINA C. BIBERA Office of the Head of Payroll and Leave Benefits </div>			Vacation Leave	Sick Leave	Total Earned			Less this Application			Balance			7.b RECOMMENDATION: <input type="checkbox"/> For Approval <input type="checkbox"/> For Disapproval due to: <div style="text-align: center;"> RUTH O. ESCASINAS Department of Agronomy </div>	
	Vacation Leave	Sick Leave													
Total Earned															
Less this Application															
Balance															
7.c APPROVED FOR: ___ day(s) with pay ___ day(s) without pay Others (Specify): _____		7.d DISAPPROVED due to: _____													
<div style="display: flex; justify-content: center; align-items: center;"> <div> EDGARDO E. TULIN (Printed Name and Signature) University President </div> </div>															

DA-AFL-22-37



Republic of the Philippines

VISAYAS STATE UNIVERSITY

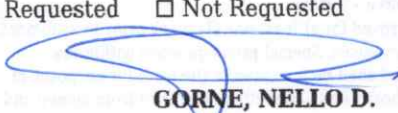
Visca, Baybay City, Leyte

Stamp of Date of Receipt

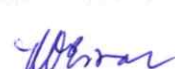
APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)	(Middle)
DA	Gorne	Nello	Degracia
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
06/22/2022	Assistant Professor IV		

6. DETAILS OF APPLICATION

<p>6.a TYPE OF LEAVE TO BE AVAILED OF:</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Mandatory/Force</p> <p><input type="checkbox"/> Maternity</p> <p><input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver</p> <p><input type="checkbox"/> Maternity - additional 15 days for single mother</p> <p><input type="checkbox"/> Monetization</p> <p><input type="checkbox"/> Parental (Solo Parent)</p> <p><input type="checkbox"/> Paternity</p> <p><input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Sabbatical</p> <p><input type="checkbox"/> Sick</p> <p><input type="checkbox"/> Special Emergency (Calamity)</p> <p><input type="checkbox"/> Special Leave Benefits for women</p> <p><input type="checkbox"/> Special Leave Privilege</p> <p><input type="checkbox"/> Study</p> <p><input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)</p> <p><input type="checkbox"/> Vacation</p> <p>Others: <u>CDO</u></p>	<p>6.b DETAILS OF LEAVE:</p> <p>In case of vacation/Special Privilege leave:</p> <p><input type="checkbox"/> Within the Philippines :</p> <p><input type="checkbox"/> Abroad (Pls. Specify) :</p> <p>In case of Sick leave:</p> <p><input type="checkbox"/> In Hospital (Pls. Specify) :</p> <p><input type="checkbox"/> Out Patient (Pls. Specify) :</p> <p>In case of Special Leave Benefits for Women: (Specify Illness)</p> <p>In case of Study leave:</p> <p><input type="checkbox"/> Completion of Master's Degree</p> <p><input type="checkbox"/> BAR/Board Examination Review</p> <p>Other purpose:</p> <p><input type="checkbox"/> Monetization of Leave Credits</p> <p><input type="checkbox"/> Terminal Leave</p>
<p>6.c NUMBER OF WORKING DAYS APPLIED FOR</p> <p><u>1 day</u></p> <p>Inclusive Dates</p> <p>06/24/2022 - 06/24/2022</p>	<p>6.d COMMUTATION</p> <p><input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested</p> <p></p> <p>GORNE, NELLO D.</p> <p>(Signature of Applicant)</p>

7. DETAILS OF ACTION ON APPLICATION

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	Vacation Leave	Sick Leave											
Total Earned													
Less this Application													
Balance													
<p>7.c APPROVED FOR:</p> <p><u> </u> day(s) with pay <u> </u> day(s) without pay</p> <p>Others (Specify):</p>	<p>7.d DISAPPROVED due to:</p>												


EDGARDO E. TULIN

(Printed Name and Signature)
University President