



UNIVERSITY CLEARANCE
(for Faculty and Staff)

Name: ELYDEL T. BENGALAN Position: PART-TIME INSTRUCTOR Signature: [Signature]

Address and Mobile Number: PATAK, BAYBAY CITY, LEYTE, 09828758369

Dept./Office: DEPARTMENT OF PURE AND APPLIED CHEMISTRY Last Day of Service in VSU: _____

Purpose: ☐ Resignation ☐ Retirement ☐ Transfer ☐ Study Leave ☒ Others END OF CONTRACT

Reason, if resignation: _____

Effective Date: _____

Cleared of work-related accountabilities:

[Signature]
ELIZABETH S. QUEVEDO
Name and signature of Department /Unit Head

The above-named faculty/staff is cleared of money, property and other responsibilities from units under VSU, Visca, Baybay City, Leyte.

Name of Office	Name of Authorized Official	Signature	Date Signed
VP Administrative and Finance (includes units under VPPRGAS)	<u>DANIEL LESLIE S. TAN</u>	_____	_____
VP Research, Extension & Innovation	<u>MARIA JULIET C. CENIZA</u>	<u>[Signature]</u>	<u>2/20/23</u>
VP Academic Affairs (includes offices under VP for Student Affairs and Services)	<u>BEATRIZ S. BELONIAS</u>	_____	_____

Approved:

EDGARDO G. TULIN
University President
Date: _____

*Note: Faculty/staff who is retiring, being separated from the service, transferring to another agency, or go on leave of absence for more than three months is required to process this clearance in five (5) copies. This clearance should be duly accomplished only within a month prior to retirement/resignation/separation/ from the service before receiving the last salary or any money due to the faculty/staff from the university. After completion of this clearance, submit all copies to the Office of the Head of Recruitment, Selection, Placement and Personnel Records (OHRSPPR). Processing of clearance certificate shall follow the order of number indicated.

VISAYAS STATE UNIVERSITY
Visca, Baybay City, Leyte
INTERNAL CLEARANCE

THE DEAN
College of Arts and Sciences
Visayas State University
Visca, Baybay City, Leyte

Sir/Madam: GLYDEL T.
THIS IS TO CERTIFY that BENGALAN of the Dept of DoPAC
is cleared of all
accountabilities/responsibilities:

Purpose:
Training ☐ Summer Vacation ☐ Sick leave ☐
Maternity Leave ☐ Study leave ☐ Retirement ☐
Others: End of Contract

Signature/ Date:

Dr. JETT C. QUEBEC
Head, DLABS

[Signature]
Eusebio R. Lina Jr. 2/15/23

Dr. EUSEBIO R. LINA Jr.
Head, ~~Math Dept~~ Math

Dr. ANALYN M. MAZO
Head, DBS

[Signature]
[Signature]

Mr. PAULO G. BATIDOR
Head, DepStat

Mr. LOURD FRANZ M. GABUNADA
OIC-Head, DBt

DR. ELIZABETH S. QUEVEDO
Head, DoPAC

DR. REV RHIZZA L. ABRE
Head, DPhys

Approved:

MA. THERESA P. LORETO
Dean, CAS



CERTIFICATE OF GRADE SUBMISSION

FEBRUARY 20, 2023

Date

TO WHOM IT MAY CONCERN:

This is to certify that Mr./Ms./Prof./Dr. _____

GLYDEL T. BENGALAN

(Name of Faculty)

a faculty of the _____

DO PAC

(Department)

has satisfactorily submitted _____

10

grade

(No. of Grade Sheets)

sheets for the subject(s) that is/are being handled this _____

1st Semester, A.Y. 2022-2023

(Semester, Academic Year)

This certification is issued for the purpose of faculty clearance.

MARWEN A. CASTAÑEDA

University Registrar



SPMO INTERNAL CLEARANCE

Name: Glydel T. Bengalan

Position: Part-time Instructor

Department/Office: DoPAC

This is to **CERTIFY** that the above name personnel is cleared of all property accountabilities from our office.

Purpose:

☐ Resignation

☐ Study Leave

☐ Retirement

☒ Others: End of contract

☐ Transfer

Approved by:

ALICIA M. FLORES

Head, SPMO 4/4/21/2020

