



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

Stamp of Date of Receipt

### APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT: Office of the Vice Pres for Academic Affairs	2. NAME: (Last) (First) (Middle) MONDAL NELSIE FERNANDEZ												
3. DATE OF FILING: April 25, 2022	4. POSITION Admin Aide IV												
5. SALARY													
<b>6. DETAILS OF APPLICATION</b>													
6.A TYPE OF LEAVE TO BE AVAILED OF <input type="checkbox"/> Vacation Leave (Sec.51, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Mandatory/Forced Leave (Sec.25, Rule XVI, Omnibus Rules Implementing EO No. 292) <input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Maternity Leave (RA No. 11210 / IRR issued by CSC, DOLE and SSS) <input type="checkbox"/> Paternity Leave (RA No. 8187 / CSC MC No. 71, s. 1998, as amended) <input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing EO No. 292) <input type="checkbox"/> Solo Parent Leave (RA No. 8972 / CSC MC No. 8, s. 2004) <input type="checkbox"/> Study Leave (Sec. 68, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Ten-Day VAWC Leave (RA No. 9262/CSC MC No. 15, s. 2005) <input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing EO No. 292) <input type="checkbox"/> Special Leave Benefits for Women (RA No. 9710/CSC MC No. 25, s.2010) <input checked="" type="checkbox"/> Special Emergency/Calamity Leave (CSC MC No. 2, s. 2012, as amended) <input type="checkbox"/> Adoption Leave (R.A. No. 8552) <input type="checkbox"/> Others: _____	6.B DETAILS OF LEAVE <i>In case of Vacation/Special Privilege Leave:</i> Within the Philippines _____ Abroad (specify) _____ <i>In case of Sick Leave:</i> In Hospital (specify illness) _____ Out Patient (specify illness) _____ <i>In case of Special Leave Benefits for Women:</i> (Specify) _____ <i>In case of Study Leave:</i> Completion of Master's Degree BAR/Board Examination Review <i>Other purpose:</i> Monetization of Leave Credits Terminal Leave												
6.C NUMBER OF WORKING DAYS APPLIED FOR Five (5) Days INCLUSIVE DAYS May 02, 04-06 & 10, 2022	6.D COMMUTATION Not Requested Requested NELSIE F. MONDAL (Signature of Applicant)												
<b>7. DETAILS OF ACTION ON APPLICATION</b>													
7.A CERTIFICATION OF LEAVE CREDITS AS OF _____ <table border="1"><thead><tr><th></th><th>Vacation Leave</th><th>Sick Leave</th></tr></thead><tbody><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></tbody></table> REGINA C. BIBERA Administrative Officer II (Authorized Officer)		Vacation Leave	Sick Leave	Total Earned	_____	_____	Less this application	_____	_____	Balance	_____	_____	7.B RECOMMENDATION For approval For disapproval due to _____  BEATRIZ S. BELONIAS Vice President for Academic Affairs (Authorized Officer)
	Vacation Leave	Sick Leave											
Total Earned	_____	_____											
Less this application	_____	_____											
Balance	_____	_____											
7.C APPROVED FOR <input checked="" type="checkbox"/> day(s) with pay ____ day(s) without pay ____ others (specify) _____	7.D DISAPPROVED DUE TO _____ _____ _____												
EDGARDO E. TULIN President (Authorized Official)													