



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

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT DoPAC	2. NAME : (Last) (First) (Middle) LINA VIVIAN P.	
3. DATE OF FILING <u>April 20, 2022</u>	4. POSITION <u>Instructor 1</u>	

6. DETAILS OF APPLICATION

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 E.O. No. 292) <input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Maternity Leave (R.A. No. 11210 / IRR issued by CSC, DOLE and SSS) <input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended) <input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. 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"/> 10-Day VAWC Leave (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. 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) 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 Illness) _____ <i>In case of Study Leave:</i> Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave
6.C NUMBER OF WORKING DAYS APPLIED FOR 4 days INCLUSIVE DATES May 4,5,6 & 10, 2022	6.D COMMUTATION Not Requested Requested <div style="text-align: right;"> VIVIAN P. LINA (Signature of Applicant)</div>

7. DETAILS OF ACTION ON APPLICATION

7.A CERTIFICATION OF LEAVE CREDITS As of _____ <table border="1" style="width:100%; margin-top: 10px;"><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> <div style="text-align: center;">REGINA BIBERA, Adm. Officer II (Authorized Officer)</div>		Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			7.B RECOMMENDATION For approval For disapproval due to _____ <div style="text-align: right;"> ELIZABETH S. QUEVEDO Office/Dept./Unit _____ (Authorized Officer)</div>
	Vacation Leave	Sick Leave											
Total Earned													
Less this application													
Balance													

7.C APPROVED FOR: _____ days with pay _____ days without pay _____ others (Specify) _____	7.D DISAPPROVED DUE TO: _____ _____ _____
<div style="margin-top: 20px;">EDGARDO E. TULIN President _____ (Authorized Official)</div>	



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6. DETAILS OF APPLICATION

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Others: _____

6.B DETAILS OF LEAVE

In case of Vacation/Special Privilege Leave:

Within the Philippines _____

Abroad (Specify) _____

In case of Sick Leave:

In Hospital (Specify Illness) _____

Out Patient (Specify Illness) _____

In case of Special Leave Benefits for Women:

(Specify Illness) _____

In case of Study Leave:

Completion of Master's Degree

BAR/Board Examination Review

Other purpose:

Monetization of Leave Credits

Terminal Leave

6.C NUMBER OF WORKING DAYS APPLIED FOR

1 day

INCLUSIVE DATES

April 22, 2022

6.D COMMUTATION

Not Requested

Requested

VIVIAN P. LINA

(Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION

7.A CERTIFICATION OF LEAVE CREDITS

As of _____

	Vacation Leave	Sick Leave
Total Earned		
Less this application		
Balance		

REGINA BIBERA, Adm. Officer II
(Authorized Officer)

7.B RECOMMENDATION

For approval

For disapproval due to _____

ELIZABETH S. QUEVEDO

Office/Dept./Unit

(Authorized Officer)

7.C APPROVED FOR:

- _____ days with pay
- _____ days without pay
- _____ others (Specify)

7.D DISAPPROVED DUE TO:

EDGARDO E. TULIN
President
(Authorized Official)




ARRANGEMENT FOR CLASS(ES) MISSED

(To be attached to Application for Leave Form and/or Travel Order/Request)

Name of Faculty		Department	Date of Filing
ALLAN A. RAMAL		DoPAC	April 20, 2022

Subject(s) Taught	Class Schedule	No. of Students	Arrangement for classes missed/ to be missed
Chem 148.2 – Analytical Chemistry 2 (2 sections)	13:00-16:00 MW 10:00-13:00 MW	20 24	Conduct classes even if on leave
Chem 148n – Analytical Chemistry 2 (2 sections)	8:30-10:00 TTh 8:30-10:00 MW	20 24	
Chem 194 – Analytical Chemistry C3 (2 sections)	10:00-11:00 W 11:00-12:00 W	21 22	

Reason(s) of: Farm damage repair & cleaning the house	
a. Leave: Date(s) <input type="checkbox"/> Vacation <input type="checkbox"/> Sick <input type="checkbox"/> others (Pls. specify) _____ April 18,19,20,21 & 22, 2022	b. Travel: Date(s) _____

Conforme: _____ Name & Signature of person taking over the classes(s)	Prepared by:  ALLAN A. RAMAL Name & Signature of Instructor/Professor
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*to be accomplished in 2 copies