



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) |
| CaO | Atupan | Queen-Ever | Yurango |
| 3. DATE OF FILING | 4. POSITION | 5. SALARY (Monthly) | |
| 02/20/2023 | Supervising Administrative Officer | | |

6. DETAILS OF APPLICATION

6.a TYPE OF LEAVE TO BE AVAILED OF:

- ☐ Adoption
☐ Mandatory/Force
☐ Maternity
☐ Maternity - 7 days Transferable to father/alternate caregiver
☐ Maternity - additional 15 days for single mother
☐ Monetization
☐ Parental (Solo Parent)
☐ Paternity
☐ Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)
☐ Sabbatical
☐ Sick
☐ Special Emergency (Calamity)
☐ Special Leave Benefits for women
☐ Special Leave Privilege
☐ Study
☐ VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)
☐ Vacation

Others: CDO

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:

- ☐ Within the Philippines :
☐ Abroad (Pls. Specify) :

In case of Sick leave:

- ☐ In Hospital (Pls. Specify) :
☐ Out Patient (Pls. Specify) :

In case of Special Leave Benefits for Women:
(Specify illness)

In case of Study leave:

- ☐ BAR/Board Examination Review
☐ Completion of Master's Degree
☐ Completion of Doctorate Degree
☐ Completion of PHD Degree

Other purpose:

- ☐ Monetization of Leave Credits
☐ Terminal Leave

6.c NUMBER OF WORKING DAYS APPLIED FOR

1 day

Inclusive Dates

02/28/2023 - 02/28/2023

6.d COMMUTATION

☒ Requested ☐ Not Requested

ATUPAN, QUEEN-EVER Y.

(Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION

7.a CERTIFICATION OF LEAVE CREDITS

AS of: February 2023

| | Vacation Leave | Sick Leave |
|-----------------------|----------------|------------|
| Total Earned | 5.849 | 11.333 |
| Less this Application | | |
| Balance | 5.849 | 11.333 |

REGINA C. BIBERA

Office of the Head of Payroll and Leave Benefits

7.b RECOMMENDATION:

- ☐ For Approval
☐ For Disapproval due to:

RYSAN C. GUINOCOR

Office of the Director for Administrative Services

7.c APPROVED FOR:

___ day(s) with pay ___ day(s) without pay
 Others (Specify):

7.d DISAPPROVED due to: