



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)												
<b>BIDANI</b>	<b>Edullantes</b>	<b>Melodina</b>	<b>Petilos</b>												
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)												
<b>11/14/2025</b>	<b>Science Research Specialist I</b>														
<b>6. DETAILS OF APPLICATION</b>															
<b>6.a TYPE OF LEAVE TO BE AVAILED OF:</b>  <input type="checkbox"/> Adoption Leave <input type="checkbox"/> Mandatory/Force <input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver <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"/> Sick <input type="checkbox"/> Special Leave Benefits for women <input type="checkbox"/> Special Leave Privileges <input type="checkbox"/> Study <input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Vacation  Others: <u>Calamity Leave (Special Emergency Leave)</u>		<b>6.b DETAILS OF LEAVE:</b>  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"/> BAR/Board Examination Review <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> Completion of Doctorate Degree <input type="checkbox"/> Completion of PHD Degree  Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave													
<b>6.c NUMBER OF WORKING DAYS APPLIED FOR</b>  <div style="text-align: center;"> <b>3 days</b>              Inclusive Dates   <b>11/11/2025 - 11/13/2025</b> </div>		<b>6.d COMMUTATION</b>  <input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested  <div style="text-align: center;">   <b>EDULLANTES, MELODINA P.</b>              (Signature of Applicant)           </div>													
<b>7. DETAILS OF ACTION ON APPLICATION</b>															
<b>7.a CERTIFICATION OF LEAVE CREDITS</b> AS of: <u>November 2025</u>  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%;">Vacation Leave</td> <td style="width: 25%;">Sick Leave</td> </tr> <tr> <td>Total Earned</td> <td style="text-align: center;">14.939</td> <td style="text-align: center;">4.708</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;"> <b>FLORANTE G. DIDAL</b>              Payroll and Leave Benefits Office           </div>			Vacation Leave	Sick Leave	Total Earned	14.939	4.708	Less this Application			Balance			<b>7.b RECOMMENDATION:</b>  <input type="checkbox"/> For Approval  <input type="checkbox"/> For Disapproval due to:  <div style="text-align: center;">   <b>LILIAN B. NUÑEZ</b>              Institute for Strategic Research and Development Studies           </div>	
	Vacation Leave	Sick Leave													
Total Earned	14.939	4.708													
Less this Application															
Balance															
<b>7.c APPROVED FOR:</b> ___ day(s) with pay    ___ day(s) without pay Others (Specify):		<b>7.d DISAPPROVED due to:</b>													
<b>PROSE IVY G. YEPES</b> (Printed Name and Signature) University President															