



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

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

<b>1. OFFICE/DEPARTMENT</b>	<b>2. NAME :</b>	<b>(Last)</b>	<b>(First)</b>	<b>(Middle)</b>												
<b>Department of Mathematics</b>	<b>Igcasama, Raymund M.</b>															
<b>3. DATE OF FILING</b>	<b>January 3, 2022</b>	<b>4. POSITION</b>	<b>Instructor I</b>													
<b>5. SALARY</b> _____																
<b>6. DETAILS OF APPLICATION</b>																
<b>6.A TYPE OF LEAVE TO BE AVAILED OF</b>		<b>6.B DETAILS OF LEAVE</b>														
<input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292)		<i>In case of Vacation/Special Privilege Leave:</i>														
<input type="checkbox"/> Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292)		Within the Philippines _____														
<input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292)		Abroad (Specify) _____														
<input type="checkbox"/> Maternity Leave (R.A. No. 11210 / IRR issued by CSC, DOLE and SSS)		<i>In case of Sick Leave:</i>														
<input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended)		In Hospital (Specify Illness) _____														
<input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292)		Out Patient (Specify Illness) _____														
<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)		<i>In case of Special Leave Benefits for Women:</i>														
<input type="checkbox"/> 10-Day VAWC Leave (RA No. 9262 / CSC MC No. 15, s. 2005)		(Specify Illness) _____														
<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)		<i>In case of Study Leave:</i>														
<input checked="" type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended)		Completion of Master's Degree														
<input type="checkbox"/> Adoption Leave (R.A. No. 8552)		BAR/Board Examination Review														
Others: _____		<i>Other purpose:</i>														
Calamity Leave		Monetization of Leave Credits														
		Terminal Leave														
<b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b>		<b>6.D COMMUTATION</b>														
<b>5 days</b>		Not Requested														
<b>INCLUSIVE DATES</b>		Requested														
<b>January 10-14, 2022</b>		(Signature of Applicant)														
<b>7. DETAILS OF ACTION ON APPLICATION</b>																
<b>7.A CERTIFICATION OF LEAVE CREDITS</b>		<b>7.B RECOMMENDATION</b>														
As of _____		For approval														
<table border="1" style="width: 100%; border-collapse: collapse;"><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>			Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			For disapproval due to _____		
	Vacation Leave	Sick Leave														
Total Earned																
Less this application																
Balance																
<b>REGINA BIBERA, Adm. Officer II</b>																
(Authorized Officer)		<b>EUSEBIO R. LINA, JR.</b>														
		Head, DMATH														
		(Authorized Officer)														
<b>7.C APPROVED FOR:</b>		<b>7.D DISAPPROVED DUE TO:</b>														
<u>5</u> days with pay		_____														
_____ days without pay		_____														
_____ others (Specify)		_____														
<b>EDGARDO E. TULIN</b>																
President																
(Authorized Official)																