

Stamp of Date of Receipt

1. OFFICE/DEPARTMENT	2. NAME : (Last)	(First)	(Middle)
Office of the Dean of Students	Luna	Meriam	Martinez
3. DATE OF FILING <u>Dec. 27, 2021</u>	4. POSITION <u>Administrative Aide III</u>	5. SALARY _____	

### 6. DETAILS OF APPLICATION

<p><b>6.A TYPE OF LEAVE TO BE AVAILED OF</b></p> <p><input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input checked="" type="checkbox"/> <b>Mandatory/Forced Leave</b> (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Maternity Leave (R.A. No. 11210 / IRR issued by CSC, DOLE and SSS)</p> <p><input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended)</p> <p><input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Solo Parent Leave (RA No. 8972 / CSC MC No. 8, s. 2004)</p> <p><input type="checkbox"/> Study Leave (Sec. 68, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> 10-Day VAWC Leave (RA No. 9262 / CSC MC No. 15, s. 2005)</p> <p><input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Special Leave Benefits for Women (RA No. 9710 / CSC MC No. 25, s. 2010)</p> <p><input type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended)</p> <p><input type="checkbox"/> Adoption Leave (R.A. No. 8552)</p> <p>Others: _____</p> <p style="margin-left: 20px;">S.L.P. _____</p>	<p><b>6.B DETAILS OF LEAVE</b></p> <p><i>In case of Vacation/Special Privilege Leave:</i></p> <p style="margin-left: 40px;">Within the Philippines _____</p> <p style="margin-left: 40px;">Abroad (Specify) _____</p> <p><i>In case of Sick Leave:</i></p> <p style="margin-left: 40px;">In Hospital (Specify Illness) _____</p> <p style="margin-left: 40px;">Out Patient (Specify Illness) _____</p> <p>_____</p> <p><i>In case of Special Leave Benefits for Women:</i></p> <p>(Specify Illness) _____</p> <p>_____</p> <p><i>In case of Study Leave:</i></p> <p style="margin-left: 40px;">Completion of Master's Degree</p> <p style="margin-left: 40px;">BAR/Board Examination Review</p> <p><i>Other purpose:</i></p> <p style="margin-left: 40px;">Monetization of Leave Credits</p> <p style="margin-left: 40px;">Terminal Leave</p>
---	---

<p><b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b></p> <p style="margin-left: 20px;"><u>One Day</u></p> <p>INCLUSIVE DATES</p> <p style="margin-left: 20px;"><u>December 29, 2021</u></p>	<p><b>6.D COMMUTATION</b></p> <p style="margin-left: 20px;">Not Requested</p> <p style="margin-left: 20px;">Requested</p> <p style="text-align: right; margin-right: 20px;">             (Signature of Applicant)         </p>
---	--

### 7. DETAILS OF ACTION ON APPLICATION

<p><b>7.A CERTIFICATION OF LEAVE CREDITS</b></p> <p>As of _____</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 30%;"></th> <th style="width: 35%;">Vacation Leave</th> <th style="width: 35%;">Sick Leave</th> </tr> <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> </table> <p style="text-align: center; margin-top: 20px;"> <b>REGINA BIBERA, Adm. Officer II</b>            _____            (Authorized Officer)         </p>		Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			<p><b>7.B RECOMMENDATION</b></p> <p><input checked="" type="checkbox"/> For approval</p> <p><input type="checkbox"/> For disapproval due to _____</p> <p>_____</p> <p style="text-align: center; margin-top: 20px;">   <b>MANOLO B. LORETO, JR.</b>            Dean of Students            _____            (Authorized Officer)         </p>
	Vacation Leave	Sick Leave											
Total Earned													
Less this application													
Balance													

<p><b>7.C APPROVED FOR:</b></p> <p>_____ days with pay</p> <p>_____ days without pay</p> <p>_____ others (Specify)</p>	<p><b>7.D DISAPPROVED DUE TO:</b></p> <p>_____</p> <p>_____</p> <p>_____</p>
--	--

for:

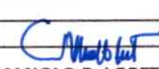

**EDGARDO E. TULIN**  
 President  
 \_\_\_\_\_  
 (Authorized Official)



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

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT <b>Office of the Dean of Students</b>	2. NAME : (Last) (First) (Middle) <b>Luna Meriam Martinez</b>													
3. DATE OF FILING <u>January 3, 2022</u> 4. POSITION <u>Administrative Aide III</u> 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 E.O. No. 292) <input checked="" 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 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  <i>Other purpose:</i> Monetization of Leave Credits Terminal Leave												
6.C NUMBER OF WORKING DAYS APPLIED FOR <u>One Day</u> INCLUSIVE DATES <u>December 31, 2021</u>		6.D COMMUTATION Not Requested Requested  (Signature of Applicant)												
<b>7. DETAILS OF ACTION ON APPLICATION</b>														
7.A CERTIFICATION OF LEAVE CREDITS As of _____ <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> <b>REGINA BIBERA, Adm. Officer II</b> (Authorized Officer)			Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			7.B RECOMMENDATION For approval <input checked="" type="checkbox"/> For disapproval due to _____   <b>MANOLO B. LORETO, JR.</b> Dean of Students (Authorized Officer)
	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: _____ _____ _____												
  <b>EDGARDO E. TULIN</b> President (Authorized Official)														



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

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT	2. NAME : (Last) (First) (Middle)													
Office of the Dean of Students	Tauy	Christie Cyrene Taganas												
3. DATE OF FILING <u>January 3, 2022</u>	4. POSITION <u>Guidance Counselor</u>	5. SALARY _____												
<b>6. DETAILS OF APPLICATION</b>														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><b>6.A TYPE OF LEAVE TO BE AVAILED OF</b> <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 checked="" 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 type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended) <input type="checkbox"/> Adoption Leave (R.A. No. 8552)  <i>Others:</i> _____</div><div style="width: 48%;"><b>6.B DETAILS OF LEAVE</b>  <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) _____ X 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  <i>Other purpose:</i> Monetization of Leave Credits Terminal Leave</div></div>														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b> one day INCLUSIVE DATES December 31, 2022</div><div style="width: 48%;"><b>6.D COMMUTATION</b> Not Requested Requested <input checked="" type="checkbox"/> <div style="text-align: center;"> (Signature of Applicant)</div></div></div>														
<b>7. DETAILS OF ACTION ON APPLICATION</b>														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><b>7.A CERTIFICATION OF LEAVE CREDITS</b> As of _____<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><div style="text-align: center; margin-top: 10px;"><b>REGINA BIBERA, Adm. Officer II</b> _____ (Authorized Officer)</div></div><div style="width: 48%;"><b>7.B RECOMMENDATION</b> For approval <input checked="" type="checkbox"/> For disapproval due to _____ _____ <div style="text-align: center; margin-top: 10px;"> <b>MANOLO B. LORETO, JR.</b> Dean of Students (Authorized Officer)</div></div></div>				Vacation Leave	Sick Leave	Total Earned			Less this application			Balance		
	Vacation Leave	Sick Leave												
Total Earned														
Less this application														
Balance														
<div style="display: flex; justify-content: space-between;"><div style="width: 48%;"><b>7.C APPROVED FOR:</b> _____ days with pay _____ days without pay _____ others (Specify) _____</div><div style="width: 48%;"><b>7.D DISAPPROVED DUE TO:</b> _____ _____ _____</div></div> <div style="text-align: center; margin-top: 20px;"> <b>EDGARDO E. TULIN</b> President _____ (Authorized Official)</div>														