



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

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT	NARC, VSU
2. NAME :	(Last) FLORES (First) MARIA ZANOA (Middle) A.
3. DATE OF FILING	May 19, 2022
4. POSITION	Admin. Aide III
5. SALARY	

6. DETAILS OF APPLICATION	
6.A TYPE OF LEAVE TO BE AVAILABLE OF	6.B DETAILS OF LEAVE
Others: ☐ Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☐ Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☒ Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☐ Maternity Leave (R.A. No. 11210 / IRR issued by CSC, D.O.E and SSS) ☐ Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended) ☐ Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☐ Solo Parent Leave (R.A. No. 8972 / CSC MC No. 8, s. 2004) ☐ Study Leave (Sec. 88, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☐ 10-Day VAWC Leave (R.A. No. 9262 / CSC MC No. 15, s. 2005) ☐ Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292) ☐ Special Leave Benefits for Women (R.A. No. 9710 / CSC MC No. 26, s. 2010) ☐ Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended) ☐ Adoption Leave (R.A. No. 8552)	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	6.D COMMUTATION
INCLUSIVE DATES May 18, 2022 1 day	Requested _____ Not Requested _____ Signature of Applicant _____

7. DETAILS OF ACTION ON APPLICATION										
7.A CERTIFICATION OF LEAVE CREDITS	7.B RECOMMENDATION									
As of _____ <table><tr><td>Total Earned</td><td>Vacation Leave</td><td>Sick Leave</td></tr><tr><td>Less this application</td><td></td><td></td></tr><tr><td>Balance</td><td></td><td></td></tr></table>	Total Earned	Vacation Leave	Sick Leave	Less this application			Balance			For approval _____ For disapproval due to _____ ROBERT V. T. PLAMONTE Director, NARC (Authorized Officer)
Total Earned	Vacation Leave	Sick Leave								
Less this application										
Balance										
7.C APPROVED FOR:	7.D DISAPPROVED DUE TO:									

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

EDGARDO E. TULIN
President
(Authorized Official)