

## Republic of the Philippines

VISAYAS STATE UNIVERSITY Visca, Baybay City, Leyte Stamp of Date of Receipt

## APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (I	ast)	(First)	(Middle)
ISRDS	Cern	a	Mizael	Bedayo
3. DATE OF FILING				5. SALARY (Monthly)
12/02/2022 Administrat			tive Aide III	time a feat or No. 10 or
6. DETAILS OF APPLICATION				
6.a TYPE OF LEAVE TO BE	AVAILED OF:	and the second	6.b DETAILS O	F LEAVE:
□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:			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  4 days Inclusive Dates  12/26/2022 - 12/29/2022			6.d COMMUTA	1 107 CITY 100   1 411   1 1 411   103   1041
The design of the section with the	7. DE	TAILS OF AC	TION ON APPL	ICATION
7.a CERTIFICATION OF LE AS of: <u>December 2022</u>		- Hamile & I	7.b RECOMME	
at the Athermatical	Vacation Leave	Sick Leave	□ For Appro	val
Total Earned				And the state of t
Less this Application	21 (611)	201.7mm 1 2 1	☐ For Disapp	proval due to:
Balance				A COUNTY
REGIN. Office of the Head of	A C. BIBERA Payroll and Leave	Benefits	Institute fo	LILIAN B. NUÑEZ  r Strategic Research & Development Studies
7.c APPROVED FOR:	endinado de elemento de entrador. A Para entrador de entrador		7.d DISAPPROV	VED due to:
day(s) with pay Others (Specify):	day(s) without pa	у	7.d DISAIT NO	print p. Sees office.
the resemble of the	Per n. 1 30 - 7 - 10	EDGAR	DO E. TULIN	The state of the s
* *		(Printed Na	ame and Signature) sity President	