

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)
FARMI	Gabunada	Fe	Macavinta
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
07/06/2022 Professor VI			
6. DETAILS OF APPLICATION			
6.a TYPE OF LEAVE TO BE AVAILED OF: 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:		6.b DETAILS OF LEAVE: In case of vacation/Special Privilege leave: □ Within the Philippines: □ Abroad (Pls. Specify): In case of Sick leave: □ In Hospital (Pls. Specify): 図 Out Patient (Pls. Specify): Body malaise 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 1 day Inclusive Dates 07/05/2022 - 07/05/2022		6.d COMMUTATION ☑ Requested ☐ Not Requested GABUNADA, FE M. (Signature of Applicant)	
7. DETAILS OF ACTION ON APPLICATION			
		7.b RECOMMENDATION:	
Total Earned Less this Application Balance	acation Leave Sick Leave	⊠ For Approval □ For Disapproval du	ne to:
REGINA C. BIBERA Office of the Head of Payroll and Leave Benefits c. APPROVED FOR: day(s) with pay thers (Specify): day(s) without pay			BER C. LUSANTA ce Management Institute to:
EDGARDO E. TULIN (Printed Name and Signature) University President			