



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

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT <b>Eco-FARMI</b>	2. NAME : (Last) (First) (Middle) <b>VALDEVIESO, GELBERTO P.</b>	
3. DATE OF FILING <b>March 18, 2022</b>	4. POSITION <b>Driver</b>	5. SALARY <b>₱ 0.00</b>

  

### 6. DETAILS OF APPLICATION

<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 checked="" type="checkbox"/> <b>Mandatory/Forced Leave</b> (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input 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: _____	<b>6.B DETAILS OF LEAVE</b>  <i>In case of Vacation/Special Privilege Leave:</i> Within the Philippines <u><b>Residence</b></u> 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  Other purpose: Monetization of Leave Credits Terminal Leave
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<b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b> <u><b>3 days</b></u>  <b>INCLUSIVE DATES</b> <u><b>April 20-22, 2022</b></u>	<b>6.D COMMUTATION</b> Not Requested Requested <u><i>[Signature]</i></u> <b>GELBERTO P. VALDEVIESO</b> (Signature of Applicant)
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### 7. DETAILS OF ACTION ON APPLICATION

<b>7.A CERTIFICATION OF LEAVE CREDITS</b> As of _____ <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> <div style="text-align: center; margin-top: 10px;"> <b>REGINA BIBERA, Adm. Officer II</b>          (Authorized Officer)       </div>		Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			<b>7.B RECOMMENDATION</b> For approval For disapproval due to _____  <div style="text-align: center; margin-top: 10px;"> <b>DHENBER C. LUSANTA</b>          OIC, ECO-FARMI          (Authorized Officer)       </div>
	Vacation Leave	Sick Leave											
Total Earned													
Less this application													
Balance													

<b>7.C APPROVED FOR:</b> _____ days with pay _____ days without pay _____ others (Specify) _____	<b>7.D DISAPPROVED DUE TO:</b> _____ _____ _____
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**EDGARDO E. TULIN**  
 President  
 (Authorized Official)