



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

Stamp of Date of Receipt:

## APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT <b>OHRA</b>	2. NAME : (Last) <b>Espinosa,</b> (First) <b>Graciana</b> (Middle) <b>M.</b>
3. DATE OF FILING <u>June 28 2022</u>	4. POSITION <u>Admin Aide VI</u> 5. SALARY <u>P</u>

### 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 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 (R.A. 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 (R.A. 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 (R.A. 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>	<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) _____ 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
<b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b> <u>1 day</u>  INCLUSIVE DATE <u>June 27, 2022</u>	<b>6.D COMMUTATION</b>  Not Requested Requested  _____ (Signature of Applicant)

### 7. DETAILS OF ACTION ON APPLICATION

<b>7.A CERTIFICATION OF LEAVE CREDITS</b> As of _____ <table><tr><td></td><td>Vacation Leave</td><td>Sick Leave</td></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>  <b>REGINA C. BIBERA</b> (Authorized Officer/Admin. Officer II)		Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			<b>7.B RECOMMENDATION</b>  For approval For disapproval due to _____ _____ _____  <b>MARIA ROBERTA S. MIRAFLORES</b> (Authorized Officer/ Head, OHRA)
	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)