



October 28, 2022

Edgardo E. Tulin, PhD
University President
Visayas State University
Baybay City, Leyte

Thru: Dr. Beatriz S. Belonias
VP for Academic Affairs

Dear Sir:

I would like to designate Prof. Jacob Glenn F. Jansalin as Officer-in-Charge of the Department of Pure and Applied Chemistry on November 2, 2022 or until my return for I will be on leave. As OIC, Professor Jansalin is authorized to discharge the functions of DoPAC head in addition to his present duties and responsibilities.

Thank you for your action on this designation.

Respectfully yours,

ELIZABETH S. QUEVEDO
Head, DoPAC

Conforme:

JACOB GLENN F. JANSALIN
Assoc Professor V

Recommending Approval:

MA. THERESA P. LORETO
Dean, CAS

BEATRIZ S. BELONIAS
VP for Academic Affairs

Approved:

EDGARDO E. TULIN
President



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)
DOPAC	Quevedo	Elizabeth	Sombilon
3. DATE OF FILING	4. POSITION	5. SALARY (Monthly)	
11/01/2022	Associate Professor II		

6. DETAILS OF APPLICATION

6.a TYPE OF LEAVE TO BE AVAILED OF:

- ☐ Adoption
☐ Educational Tour (Local) (UADCO Resolution No. 7, s. 2008 and OP Memo Circular No. 18, 2009)
☐ 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 : At home
☐ 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

1 day
 Inclusive Dates

11/02/2022 - 11/02/2022

6.d COMMUTATION

- ☒ Requested ☐ Not Requested

QUEVEDO, ELIZABETH S.

(Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION

7.a CERTIFICATION OF LEAVE CREDITS

AS of: November 2022

	Vacation Leave	Sick Leave
Total Earned		
Less this Application		
Balance		

REGINA C. BIBERA

Office of the Head of Payroll and Leave Benefits

7.b RECOMMENDATION:

- ☐ For Approval
☐ For Disapproval due to:

MA. THERESA P. LORETO
 College of Arts and Sciences

7.c APPROVED FOR:

____ day(s) with pay ____ day(s) without pay
 Others (Specify):


7.d DISAPPROVED due to:

EDGARDO E. TULIN

(Printed Name and Signature)
 University President

ARRANGEMENT FOR CLASS(ES) MISSED

(To be attached to Application for Leave Form and/or Travel Order/Request)

Name of Faculty		Department	Date of Filing
ELIZABETH S. QUEVEDO		DoPAC	October 28, 2022
Subject(s) Taught	Class Schedule	No. of Students	Arrangement for classes missed/ to be missed
			No classes affected (Special Working Holiday)
Reason(s) of: Authentication of PRC License			
a. Leave: Date(s) <input type="checkbox"/> Vacation <input type="checkbox"/> Sick <input type="checkbox"/> others (Pls. specify)_		b. Travel: Date(s)_____	
SLP			
Conforme:		Prepared by:	
_____ Name & Signature of person taking over the classes(s)		 ELIZABETH S. QUEVEDO Name & Signature of Instructor/Professor	
Approved by: MA. THERESA P. LORETO Name & Signature of Immediate Supervisor Date: _____			

*to be accomplished in 2 copies