

DAILY TIME RECORD **BAGARINAO, MARIEDITH I.**

(NAME)

For the month of
March 1 - 31, 2023
 Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-WED	6:45	12:02	12:36	5:31		8hrs
2-THU	7:01	12:06	12:37	5:14		8hrs
3-FRI	7:00	12:35	12:41	5:16		8hrs
4-SAT						Off
5-SUN						Off
6-MON	7:02	12:47	1:23	5:22	23mins	7hrs 37mins
7-TUE	6:51	12:04	12:24	5:21		8hrs
8-WED	7:01	12:01	12:06	5:28		8hrs
9-THU	7:18	12:00	12:04	5:25		8hrs
10-FRI	6:50	12:02	12:08	5:00		8hrs
11-SAT						Off
12-SUN						Off
13-MON	7:53	12:48	12:53	5:14		8hrs
14-TUE	7:00	12:02	12:07	5:11		8hrs
15-WED	7:07	12:00	12:14	5:14		8hrs
16-THU	7:51	12:43	12:49	5:37		8hrs
17-FRI						FL
18-SAT						Off
19-SUN						Off
20-MON	6:57	12:03	12:18	5:25		8hrs
21-TUE	6:59	12:00	12:03	5:14		8hrs
22-WED	6:58	12:00	12:08	5:18		8hrs
23-THU	7:10	12:04	12:07	5:14		8hrs
24-FRI	7:03	12:52	12:54	5:10		8hrs
25-SAT						Off
26-SUN						Off
27-MON	7:50	12:02	12:06	5:07		8hrs
28-TUE	7:59	12:01	12:10	5:24		8hrs
29-WED	8:08	1:00	1:01	5:26	9mins	7hrs 51mins
30-THU	8:06	12:04	12:24	5:22	6mins	7hrs 54mins
31-FRI	7:53	12:00	12:03	5:45		8hrs

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.


MARIEDITH I. BAGARINAO

VERIFIED as to prescribed office hours


RUTH O. ESCASINAS

Department Head
 Department of Agronomy



Republic of the Philippines

VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

Stamp of Date of Receipt

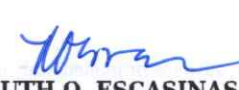
APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)	(Middle)
DA	Bagarinao	Mariedith	Itang
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
03/16/2023	Assistant Professor II		

6. DETAILS OF APPLICATION

6.a TYPE OF LEAVE TO BE AVAILED OF: <input type="checkbox"/> Adoption <input checked="" type="checkbox"/> Mandatory/Force <input type="checkbox"/> Maternity <input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver <input type="checkbox"/> Maternity - additional 15 days for single mother <input type="checkbox"/> Monetization <input type="checkbox"/> Parental (Solo Parent) <input type="checkbox"/> Paternity <input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Sabbatical <input type="checkbox"/> Sick <input type="checkbox"/> Special Emergency (Calamity) <input type="checkbox"/> Special Leave Benefits for women <input type="checkbox"/> Special Leave Privilege <input type="checkbox"/> Study <input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Vacation Others: _____	6.b DETAILS OF LEAVE: In case of vacation/Special Privilege leave: <input type="checkbox"/> Within the Philippines : <input type="checkbox"/> Abroad (Pls. Specify) : In case of Sick leave: <input type="checkbox"/> In Hospital (Pls. Specify) : <input type="checkbox"/> Out Patient (Pls. Specify) : In case of Special Leave Benefits for Women: (Specify Illness) In case of Study leave: <input type="checkbox"/> BAR/Board Examination Review <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> Completion of Doctorate Degree <input type="checkbox"/> Completion of PHD Degree Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave
6.c NUMBER OF WORKING DAYS APPLIED FOR 1 day Inclusive Dates 03/17/2023 - 03/17/2023	6.d COMMUTATION <input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested  BAGARINAO, MARIEDITH I. (Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION

7.a CERTIFICATION OF LEAVE CREDITS AS of: <u>March 2023</u> <table border="1"> <thead> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> </thead> <tbody> <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> </tbody> </table> HONEY SOFIA V. COLIS Office of the Director for Human Resource Management		Vacation Leave	Sick Leave	Total Earned			Less this Application			Balance			7.b RECOMMENDATION: <input type="checkbox"/> For Approval <input type="checkbox"/> For Disapproval due to:  RUTH O. ESCASINAS Department of Agronomy
	Vacation Leave	Sick Leave											
Total Earned													
Less this Application													
Balance													
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