



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

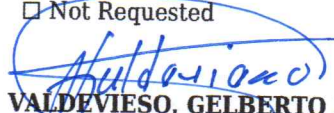
Stamp of Date of Receipt

### APPLICATION FOR LEAVE

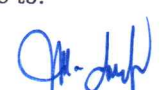
|                          |                                |                     |                 |
|--------------------------|--------------------------------|---------------------|-----------------|
| 1. OFFICE/DEPT./DIVISION | Name (Last)                    | (First)             | (Middle)        |
| <b>FARMI</b>             | <b>Valdevieso</b>              | <b>Gelberto</b>     | <b>Poliquit</b> |
| 3. DATE OF FILING        | 4. POSITION                    | 5. SALARY (Monthly) |                 |
| <b>03/27/2023</b>        | <b>Administrative Aide III</b> |                     |                 |

### 6. DETAILS OF APPLICATION

|   |   |
|---|---|
| <b>6.a TYPE OF LEAVE TO BE AVAILED OF:</b><br><input type="checkbox"/> Adoption<br><input type="checkbox"/> Mandatory/Force<br><input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver<br><input type="checkbox"/> Maternity - additional 15 days for single mother<br><input checked="" type="checkbox"/> Monetization<br><input type="checkbox"/> Parental (Solo Parent)<br><input type="checkbox"/> Paternity<br><input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)<br><input type="checkbox"/> Sabbatical<br><input type="checkbox"/> Sick<br><input type="checkbox"/> Special Emergency (Calamity)<br><input type="checkbox"/> Special Leave Benefits for women<br><input type="checkbox"/> Special Leave Privilege<br><input type="checkbox"/> Study<br><input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)<br><input type="checkbox"/> Vacation<br><br>Others: _____ | <b>6.b DETAILS OF LEAVE:</b><br><br>In case of vacation/Special Privilege leave:<br><input type="checkbox"/> Within the Philippines :<br><input type="checkbox"/> Abroad (Pls. Specify) :<br><br>In case of Sick leave:<br><input type="checkbox"/> In Hospital (Pls. Specify) :<br><input type="checkbox"/> Out Patient (Pls. Specify) :<br><br>In case of Special Leave Benefits for Women:<br>(Specify Illness)<br><br>In case of Study leave:<br><input type="checkbox"/> BAR/Board Examination Review<br><input type="checkbox"/> Completion of Master's Degree<br><input type="checkbox"/> Completion of Doctorate Degree<br><input type="checkbox"/> Completion of PHD Degree<br><br>Other purpose:<br><input type="checkbox"/> Monetization of Leave Credits<br><input type="checkbox"/> Terminal Leave |
|---|---|

|  |  |
|--|--|
| <b>6.c NUMBER OF WORKING DAYS APPLIED FOR</b><br><br><u>20 days</u><br><br>Inclusive Dates | <b>6.d COMMUTATION</b><br><input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested<br><br><br><b>VALDEVIESO, GELBERTO P.</b><br>(Signature of Applicant) |
|--|--|

### 7. DETAILS OF ACTION ON APPLICATION

| <b>7.a CERTIFICATION OF LEAVE CREDITS</b><br>AS of: <u>March 2023</u><br><table border="1"> <thead> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> </thead> <tbody> <tr> <td>Total Earned</td> <td>0.945</td> <td>111.709</td> </tr> <tr> <td>Less this Application</td> <td></td> <td></td> </tr> <tr> <td>Balance</td> <td>0.945</td> <td>111.709</td> </tr> </tbody> </table><br><b>HONEY SOFIA V. COLIS</b><br>Office of the Director for Human Resource Management |                                | Vacation Leave | Sick Leave | Total Earned | 0.945 | 111.709 | Less this Application |  |  | Balance | 0.945 | 111.709 | <b>7.b RECOMMENDATION:</b><br><br><input type="checkbox"/> For Approval<br><input type="checkbox"/> For Disapproval due to:<br><br><br><b>JEROME O. ARRIBADO</b><br>Ecological Farm & Resource Management Institute |
|---|--------------------------------|----------------|------------|--------------|-------|---------|-----------------------|--|--|---------|-------|---------|--|
|   | Vacation Leave                 | Sick Leave     |            |              |       |         |                       |  |  |         |       |         |  |
| Total Earned  | 0.945                          | 111.709        |            |              |       |         |                       |  |  |         |       |         |  |
| Less this Application   |                                |                |            |              |       |         |                       |  |  |         |       |         |  |
| Balance   | 0.945                          | 111.709        |            |              |       |         |                       |  |  |         |       |         |  |
| <b>7.c APPROVED FOR:</b><br>___ day(s) with pay    ___ day(s) without pay<br>Others (Specify):  | <b>7.d DISAPPROVED due to:</b> |                |            |              |       |         |                       |  |  |         |       |         |  |

**EDGARDO E. TULIN**

(Printed Name and Signature)  
 University President