1. OFFICE/AGENCY	2.	NAME	(Last)	(First)	(Middle)			
VISAYAS STATE UNIVERSITY		(	ORRE	ELVIR	A BULAWAN			
<b>3. DATE OF FILING:</b> JAN. 13, 2020	4.	POSITI	on: ADMIN.	ASST. II	5. SALARY:			
6.DETAILS OF APPLICATION								
6.a TYPE OF LEAVE:			6.b. WHERE L	EAVE WILL B	E SPENT			
[ ] Vacation         [ ] To seek employment         [ ] Others (specify)			] ``	se of Vacation ] Within the F ] Abroad (spe	Philippines			
[✓] Sick [ ] Maternity [ ] Others (specify)			]	se of Sick Lea ] In hospital( ]Out-Patient	(specify)			
6.c NUMBER OF WORKING DAYS APPLIED F	OR		6.d COMMUTA	ATION				
2 days			[ ] Reque	ested	[ ] Not Requested			
Inclusive Dates:								
January 9 &10, 2020			ELVIRA B. GORRE (Signature of Applicant)					
7. DETAILS OF ACTION ON APPLICATION								
7.a CERTIFICATION OF LEAVE CREDITS			7.b RECOMM	ENDATION:				
as of Number of Days			[ ] Appro					
Vacation Sick	Tot	tal	[ ] Disap	proved due to	:			
Vacation Sick	101	iai						
HONEY SOFIA V. COLIS		MARLITO JOSE M. BANDE						
OIC, PRPEO				Authoriz	ed Official			
7.c APPROVED FOR:			7.d DISAPPRO	OVED due to:				
days with pay days with	out pa	ay						
Others (specify)								
-								
EDGARDO E. TULIN								
University President Date:								
INSTRUCTION								

- Application for vacation or sick leave for one full day or more shall be made on this Form and to be accomplished at least in duplicate. Application for vacation leave shall be filed in advance or whenever possible five (5) days before going on such leave.
- 3. Application for sick leave filed in advance or exceeding five (5) days shall be accompanied by a medical certificate. In case medical consultation was not availed of, an affidavit should be executed by the applicant.
- An employee who is absent without approved leave shall not be entitled to receive his/her salary corresponding to the period of his/her authorized leave of absence.
- An application for leave of absence for thirty (30) calendar days or more shall be accompanied by a clearance from money and property accountabilities.

CSC Form No. 6 Revised 1984

1. OFFICE/AGENCY	2. NAME	(Last)	(First)	(Middle)			
VISAYAS STATE UNIVERSITY	C	ORRE ELVIR		A BULAWAN			
<b>3. DATE OF FILING:</b> JAN. 27, 2020	4. POSITI	on: ADMII	N. ASST. II	5. SALARY:			
6.DETAILS OF APPLICATION							
6.a TYPE OF LEAVE:	LEAVE WILL BE	E SPENT					
[ ] Vacation         [ ] To seek employment         [ ] Others (specify)		(2) In c	case of Vacation [ ] Within the P [ ] Abroad (spe	Philippines			
[ ] Sick [ ] Maternity [✓] Others (specify) SLP		(3) In c	case of Sick Leav [ ] In hospital ( [ ] Out-Patient	specify)			
6.c NUMBER OF WORKING DAYS APPLIED F	OR	6.d COMMUTATION					
1 day		[ ] Requ	uested	[ ] Not Requested			
Inclusive Dates:							
January 28, 2020		ELVIRA B. GORRE					
		(Signature of Applicant)					
	ILS OF ACTION	ION ON APPLICATION  7.b RECOMMENDATION:					
7.a CERTIFICATION OF LEAVE CREDITS as of							
Number of Days		[ ] App					
Vacation Sick	Total	[ ] Disa	approved due to				
Vacation Sick	Total						
HONEY SOFIA V. COLIS		MARLITO JOSE M. BANDE					
OIC, PRPEO			Authorize	ed Official			
7.c APPROVED FOR:		7.d DISAPP	ROVED due to:				
days with pay days with	out pay						
Others (specify)							
EDGARDO E. TULIN  University President  Date:							
INSTRUCTION  1. Application for vacation or sick leave for one full day or more shall be made on this Form and to be accomplished at least in duplicate.  2. Application for vacation leave shall be filed in advance or whenever possible five (5) days before going on such leave.							

- Application for sick leave filed in advance or exceeding five (5) days shall be accompanied by a medical certificate. In case medical consultation was not availed of, an affidavit should be executed by the applicant.
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- An application for leave of absence for thirty (30) calendar days or more shall be accompanied by a clearance from money and property accountabilities.

1. OFFICE/AGENCY	2.	NAME	(Last)	(First)	(Middle)		
VISAYAS STATE UNIVERSITY		G	ORRE	ELVIR	A BULAWAN		
<b>3. DATE OF FILING:</b> MARCH 12, 2020	4.	POSITI	on: ADMIN	. ASST. II	5. SALARY:		
6.DETAILS OF APPLICATION							
6.a TYPE OF LEAVE: 6.b. WHERE LEAVE WILL BE SPENT							
[ ] Vacation         [ ] To seek employment         [ ] Others (specify)			`´ [	se of Vacation ] Within the F ] Abroad (spe	Philippines		
[ ] Sick [ ] Maternity [✓] Others (specify)  SLP			(4) In case of Sick Leave  [ ] In hospital (specify)  [ ] Out-Patient (specify)				
6.c NUMBER OF WORKING DAYS APPLIED F	OR		6.d COMMUTA				
1 day			[ ] Reque	ested	[ ] Not Requested		
Inclusive Dates:							
March 13, 2020			ELVIRA B. GORRE				
7. DETA	JILS C	OF ACTIO	(Signature of Applicant)  ON ON APPLICATION				
7.a CERTIFICATION OF LEAVE CREDITS			7.b RECOMM				
as of			[ ] Appro	oved			
Number of Days			[ ] Disap	proved due to	:		
Vacation Sick	Tota	al					
HONEY SOFIA V. COLIS			MARLITO JOSE M. BANDE  Authorized Official				
OIC, PRPEO			7   0104000		ed Oπiciai		
7.c APPROVED FOR: days with pay days with	out no		7.d DISAPPR	OVED due to:			
	out pa	ау					
Others (specify)							
EDGARDO E. TULIN							
University President Date:							
INSTRUCTION							

- Application for vacation or sick leave for one full day or more shall be made on this Form and to be accomplished at least in duplicate. Application for vacation leave shall be filed in advance or whenever possible five (5) days before going on such leave.
- Application for sick leave filed in advance or exceeding five (5) days shall be accompanied by a medical certificate. In case medical
- consultation was not availed of, an affidavit should be executed by the applicant.

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- An application for leave of absence for thirty (30) calendar days or more shall be accompanied by a clearance from money and property accountabilities.

1. OFFICE/AGENCY	2.	NAME	(Last)	(First)	(Middle)			
VISAYAS STATE UNIVERSITY		(	ORRE	ELVIR	A BULAWAN			
<b>3. DATE OF FILING:</b> JUNE 23, 2020	4.	POSITI	on: ADMIN	. ASST. II	5. SALARY:			
6.DETAILS OF APPLICATION								
6.a TYPE OF LEAVE:	E SPENT							
[ ] Vacation         [ ] To seek employment         [ ] Others (specify)			] ``	se of Vacation ] Within the F ] Abroad (spe	Philippines			
[ ] Sick [ ] Maternity [✓] Others (specify)  SLP			(5) In case of Sick Leave [ ] In hospital (specify) [ ] Out-Patient (specify)					
6.c NUMBER OF WORKING DAYS APPLIED F	OR		6.d COMMUTA	ATION				
1 day			[ ] Reque	ested	[ ] Not Requested			
Inclusive Dates:								
June 22, 2020			ELVIRA B. GORRE					
	11 6 /	OE ACTI	(Signature of Applicant) ON ON APPLICATION					
7.a CERTIFICATION OF LEAVE CREDITS	il S	OI ACTI	7.b RECOMM					
as of			[ ] Appro					
Number of Days				proved due to	:			
Vacation Sick	To	tal						
HONEY SOFIA V. COLIS			MARLITO JOSE M. BANDE					
OIC, PRPEO					ed Official			
7.c APPROVED FOR:			7.d DISAPPR	OVED due to:				
days with pay days with	out p	ay						
Others (specify)								
EDGARDO E. TULIN								
University President Date:								
INSTRUCTION								
INSTRUCTION								

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- consultation was not availed of, an affidavit should be executed by the applicant.

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1. OFFICE/AGENCY	2. NAME	(Last)	(First)	(Middle)				
VISAYAS STATE UNIVERSITY	(	GORRE	ELVIRA	BULAWAN				
3. DATE OF FILING: NOV 13, 2020	4. POSITI	ON: ADMIN.	ASST. II	5. SALARY:				
6.DETAILS OF APPLICATION								
6.a TYPE OF LEAVE:		6.b. WHERE LEAVE WILL BE SPENT						
[ ] Vacation         [ ] To seek employment         [ ] Others (specify)	(5) In case of Vacation Leave  [ ] Within the Philippines  [ ] Abroad (specify)							
[ ] Sick [ ] Maternity [ ] Others (specify)  SLP		(6) In case of Sick Leave [ ] In hospital (specify) [ ] Out-Patient (specify)						
6.c NUMBER OF WORKING DAYS APPLIED F	OR	6.d COMMUTATION						
1 day		[ ] Requested [ ] Not Requested						
Inclusive Dates:		How						
Dec 2, 2020	ELVIRA B. GORRE (Signature of Applicant)							
7. DETA	ILS OF ACTION	ON ON APPLICATION						
7.a CERTIFICATION OF LEAVE CREDITS as of	7.b RECOMMENDATION:							
Number of Days		[ ] Approved [ ] Disapproved due to :						
Vacation Sick	Total							
HONEY SOFIA V. COLIS OIC, PRPEO			ELIZA D. E					
7.c APPROVED FOR:		7.d DISAPPR	OVED due to:					
days with pay days with	out pay							
Others (specify)								
EDGARDO E. TULIN  University President  Date:								
INSTRUCTION								

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- Application for sick leave filed in advance or exceeding five (5) days shall be accompanied by a medical certificate. In case medical
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