



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

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT	2. NAME :	(Last)	(First)	(Middle)
ACCOUNTING OFFICE	CASTIL	JHONAVEL	ROMBLON	
3. DATE OF FILING May 26, 2022	4. POSITION	5. SALARY		
	ADMIN AIDE III			

6. DETAILS OF APPLICATION

6.A TYPE OF LEAVE TO BE AVAILED OF <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 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 (RA 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 (RA 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 (RA 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> _____	6.B DETAILS OF LEAVE <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
6.C NUMBER OF WORKING DAYS APPLIED FOR _____ INCLUSIVE DATES May 30-31, 2022	6.D COMMUTATION Not Requested Requested <div style="text-align: right;">Jhonavel R. Castil</div> <div style="text-align: right;">(Signature of Applicant)</div>

7. DETAILS OF ACTION ON APPLICATION

7.A CERTIFICATION OF LEAVE CREDITS As of _____ <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <th style="width: 30%;"></th> <th style="width: 35%;">Vacation Leave</th> <th style="width: 35%;">Sick Leave</th> </tr> <tr> <td><i>Total Earned</i></td> <td></td> <td></td> </tr> <tr> <td><i>Less this application</i></td> <td></td> <td></td> </tr> <tr> <td><i>Balance</i></td> <td></td> <td></td> </tr> </table> <div style="text-align: center; margin-top: 10px;"> REGINA BIBERA, Adm. Officer II _____ (Authorized Officer) </div>		Vacation Leave	Sick Leave	<i>Total Earned</i>			<i>Less this application</i>			<i>Balance</i>			7.B RECOMMENDATION For approval For disapproval due to _____ _____ _____ <div style="text-align: center; margin-top: 10px;"> NICK FREDDY R. BELLO, OIC-Accounting _____ (Authorized Officer) </div>
	Vacation Leave	Sick Leave											
<i>Total Earned</i>													
<i>Less this application</i>													
<i>Balance</i>													

7.C APPROVED FOR: _____ days with pay _____ days without pay _____ others (Specify)	7.D DISAPPROVED DUE TO: _____ _____ _____
EDGARDO E. TULIN President _____ (Authorized Official)	