



Republ

VISAYAS
Visa

APPLI

1. OFFICE/DEPT./DIVISION	Name (Last)
ISRDS	Gonzaga
3. DATE OF FILING	4. POSITION
04/08/2025	Adminis
6. DETA	

6.a TYPE OF LEAVE TO BE AVAILED OF:

- ☐ Adoption
☐ Mandatory/Force
☐ 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)
☒ Sick
☐ Special Emergency (Calamity)
☐ Special Leave Benefits for women
☐ Special Leave Privileges
☐ Study
☐ VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)
☐ Vacation

Others: _____

6.c NUMBER OF WORKING DAYS APPLIED FOR

3 days
Inclusive Dates

04/02/2025 - 04/04/2025

7. DETAILS OF

7.a CERTIFICATION OF LEAVE CREDITS

AS of: April 2025

	Vacation Leave	Sick Leave
Total Earned	64.542	200
Less this Application		3
Balance	64.542	197

FLORANTE G. DIDAL

Payroll and Leave Benefits Office

7.c APPROVED FOR:

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

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Uni



Republic of the Philippines

VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

APPLICATION FOR I

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)
ISRDS	Nuñez	Lilian
3. DATE OF FILING	4. POSITION	
04/15/2025	Associate Professor	
6. DETAILS OF APPLIC		

6.a TYPE OF LEAVE TO BE AVAILED OF:

- ☐ Adoption
☐ Mandatory/Force
☐ 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)
☐ Sick
☐ Special Emergency (Calamity)
☐ Special Leave Benefits for women
☒ Special Leave Privileges
☐ Study
☐ VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)
☐ Vacation

Others: _____

6.c NUMBER OF WORKING DAYS APPLIED FOR

2 days
Inclusive Dates

04/22/2025 - 04/23/2025

7. DETAILS OF ACTION ON A

7.a CERTIFICATION OF LEAVE CREDITS

AS of: April 2025

	Vacation Leave	Sick Leave
Total Earned		
Less this Application		
Balance		

FLORANTE G. DIDAL

Payroll and Leave Benefits Office

7.c APPROVED FOR:

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

PROSE IVY G. YEP

(Printed Name and Signatu
University President