



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>ISRDS</b>	<b>Nuñez</b>	<b>Lilian</b>	<b>Bandola</b>
3. DATE OF FILING	4. POSITION	5. SALARY (Monthly)	
<b>06/27/2022</b>	<b>Associate Professor V</b>		

**6. DETAILS OF APPLICATION**

<p><b>6.a TYPE OF LEAVE TO BE AVAILED OF:</b></p> <p> <input type="checkbox"/> Adoption  <input 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 checked="" 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: _____             </p>	<p><b>6.b DETAILS OF LEAVE:</b></p> <p><b>In case of vacation/Special Privilege leave:</b></p> <p> <input checked="" type="checkbox"/> Within the Philippines : <u>Baybay City</u>  <input type="checkbox"/> Abroad (Pls. Specify) : _____                 </p> <p><b>In case of Sick leave:</b></p> <p> <input type="checkbox"/> In Hospital (Pls. Specify) : _____  <input type="checkbox"/> Out Patient (Pls. Specify) : _____                 </p> <p><b>In case of Special Leave Benefits for Women:</b> (Specify Illness) _____</p> <p><b>In case of Study leave:</b></p> <p> <input type="checkbox"/> Completion of Master's Degree  <input type="checkbox"/> BAR/Board Examination Review                 </p> <p><b>Other purpose:</b></p> <p> <input type="checkbox"/> Monetization of Leave Credits  <input type="checkbox"/> Terminal Leave                 </p>
<p><b>6.c NUMBER OF WORKING DAYS APPLIED FOR</b></p> <p><u>0.5 days</u> Inclusive Dates <u>06/30/2022 - 06/30/2022</u></p>	<p><b>6.d COMMUTATION</b></p> <p> <input checked="" type="checkbox"/> Requested    <input type="checkbox"/> Not Requested                 </p> <p style="text-align: center;">   <b>NUÑEZ, LILIAN B.</b>                  (Signature of Applicant)             </p>

**7. DETAILS OF ACTION ON APPLICATION**

<p><b>7.a CERTIFICATION OF LEAVE CREDITS</b> AS of: <u>June 2022</u></p> <table border="1" style="width: 100%;"> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> <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> </table> <p style="text-align: center;"> <b>REGINA C. BIBERA</b>                  Office of the Head of Payroll and Leave Benefits             </p>		Vacation Leave	Sick Leave	Total Earned			Less this Application			Balance			<p><b>7.b RECOMMENDATION:</b></p> <p> <input type="checkbox"/> For Approval  <input type="checkbox"/> For Disapproval due to: _____                 </p> <p style="text-align: center;"> <b>MOISES NEIL V. SERIÑO</b>                  College of Management &amp; Economics             </p>
	Vacation Leave	Sick Leave											
Total Earned													
Less this Application													
Balance													
<p><b>7.c APPROVED FOR:</b></p> <p>                 ___ day(s) with pay    ___ day(s) without pay                  Others (Specify): _____             </p>	<p><b>7.d DISAPPROVED due to:</b></p> <p>_____</p>												

**EDGARDO E. TULIN**

(Printed Name and Signature)  
University President