



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

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT <b>Office of the Head of Budget</b>	2. NAME : (Last) (First) (Middle) <b>MANATAD TERESITA GRANADA</b>													
3. DATE OF FILING <b>December 10, 2021</b> 4. POSITION <b>Administrative Aide VI</b> 5. SALARY _____														
<b>6. DETAILS OF APPLICATION</b>														
<b>6.A TYPE OF LEAVE TO BE AVAILED OF</b> 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 checked="" 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)  Others: _____		<b>6.B DETAILS OF LEAVE</b>  <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												
<b>6.C NUMBER OF WORKING DAYS APPLIED FOR</b> <b>3 days only</b>  INCLUSIVE DATES <b>November 3, 26 &amp; 29, 2021</b>		<b>6.D COMMUTATION</b>  Not Requested Requested <i>Manatad</i> <b>TERESITA G. MANATAD</b> (Signature of Applicant)												
<b>7. DETAILS OF ACTION ON APPLICATION</b>														
<b>7.A CERTIFICATION OF LEAVE CREDITS</b> As of _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <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>  <b>REGINA C. BIBERA, Adm. Officer II</b> (Authorized Officer)			Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			<b>7.B RECOMMENDATION</b>  For approval For disapproval due to _____  <div style="text-align: center;">   <b>ALICIA M. FLORES</b>  <b>OIC-Budget Office</b>          (Authorized Officer)       </div>
	Vacation Leave	Sick Leave												
Total Earned														
Less this application														
Balance														
<b>7.C APPROVED FOR:</b> _____ days with pay _____ days without pay _____ others (Specify)		<b>7.D DISAPPROVED DUE TO:</b> _____ _____ _____												
<b>EDGARDO E. TULIN</b> President (Authorized Official)														