



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>BIDANI</b>	<b>Gisulga</b>	<b>Saloma</b>	<b>Binoya</b>
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
<b>01/02/2025</b>	<b>Science Research Specialist I</b>		

**6. DETAILS OF APPLICATION****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.b DETAILS OF LEAVE:**

In case of vacation/Special Privilege leave:

- ☐ Within the Philippines :  
☐ Abroad (Pls. Specify) :

In case of Sick leave:

- ☐ In Hospital (Pls. Specify) :  
☐ Out Patient (Pls. Specify) :

In case of Special Leave Benefits for Women:  
(Specify Illness)

In case of Study leave:

- ☐ BAR/Board Examination Review  
☐ Completion of Master's Degree  
☐ Completion of Doctorate Degree  
☐ Completion of PHD Degree

Other purpose:

- ☐ Monetization of Leave Credits  
☐ Terminal Leave

**6.c NUMBER OF WORKING DAYS APPLIED FOR**5 days

Inclusive Dates

01/06/2025 - 01/10/2025

**6.d COMMUTATION**

- ☒ Requested    ☐ Not Requested

**GISULGA, SALOMA B.**

(Signature of Applicant)

**7. DETAILS OF ACTION ON APPLICATION****7.a CERTIFICATION OF LEAVE CREDITS**AS of: January 2025

	Vacation Leave	Sick Leave
Total Earned	14.998	161.542
Less this Application		
Balance	9.998	161.542

**FLORANTE G. DIDAL**

Payroll and Leave Benefits Office

**7.b RECOMMENDATION:**

- ☐ For Approval

- ☐ For Disapproval due to:

**LILIAN B. NUÑEZ**

College of Management &amp; Economics

**7.c APPROVED FOR:**

\_\_\_ day(s) with pay    \_\_\_ day(s) without pay  
 Others (Specify):

**7.d DISAPPROVED due to:****PROSE IVY G. YEPES**

\_\_\_\_\_  
 (Printed Name and Signature)  
 University President