

DAILY TIME RECORD **RATILLA, TEODOMERO C.** (NAME)

For the month of
June 1 - 30, 2023

Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-THU	8:06	12:09	12:28	5:10	6mins	7hrs 54mins
2-FRI	8:02	12:31	12:33	6:03	2mins	7hrs 58mins
3-SAT						Off
4-SUN						Off
5-MON	7:59	12:03	12:11	5:35		8hrs
6-TUE	7:57	12:03	12:20	5:29		8hrs
7-WED	7:36	12:13	12:16	5:03		8hrs
8-THU	8:02	12:15	12:18	5:09	2mins	7hrs 58mins
9-FRI	8:00	12:06	12:12	5:09		8hrs
10-SAT						Off
11-SUN						Off
12-MON						Holiday
13-TUE	7:45	12:11	12:24	5:26		8hrs
14-WED	8:06	12:07	12:16	5:03	6mins	7hrs 54mins
15-THU	7:55	12:07	12:13	6:23		8hrs
16-FRI						FL
17-SAT						Off
18-SUN						Off
19-MON						FL
20-TUE	7:53	12:05	12:18	5:36		8hrs
21-WED	7:41	12:22	12:40	5:14		8hrs
22-THU	7:53	12:22	12:34	5:02		8hrs
23-FRI	8:05	12:32	12:35	5:41	5mins	7hrs 55mins
24-SAT						Off
25-SUN						Off
26-MON	8:06	12:19	12:34	5:12	6mins	7hrs 54mins
27-TUE						SL
28-WED						Holiday
29-THU	8:04	12:21	12:23	5:48	4mins	7hrs 56mins
30-FRI	8:01	12:03	12:20	5:02	1min	7hrs 59mins

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.


TEODOMERO C. RATILLA

VERIFIED as to prescribed office hours


DIONESIO M. BAÑOC

Department Head
Department of Agronomy



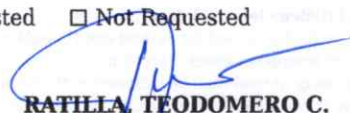
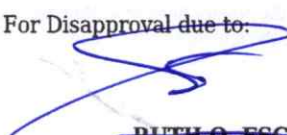
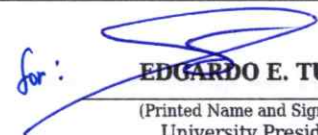
Republic of the Philippines

VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPT./DIVISION	Name (Last)	(First)	(Middle)												
DA	Ratilla	Teodomero	Cabusao												
3. DATE OF FILING	4. POSITION	5. SALARY (Monthly)													
06/29/2023	School Farm Demonstrator														
6. DETAILS OF APPLICATION															
6.a TYPE OF LEAVE TO BE AVAILED OF: <input type="checkbox"/> Adoption <input type="checkbox"/> Mandatory/Force <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 checked="" type="checkbox"/> Sick <input type="checkbox"/> Special Emergency (Calamity) <input type="checkbox"/> Special Leave Benefits for women <input 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: _____		6.b DETAILS OF LEAVE: In case of vacation/Special Privilege leave: <input type="checkbox"/> Within the Philippines : <input type="checkbox"/> Abroad (Pls. Specify) : In case of Sick leave: <input type="checkbox"/> In Hospital (Pls. Specify) : <input checked="" type="checkbox"/> Out Patient (Pls. Specify) : <u>home</u> In case of Special Leave Benefits for Women: (Specify Illness) In case of Study leave: <input type="checkbox"/> BAR/Board Examination Review <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> Completion of Doctorate Degree <input type="checkbox"/> Completion of PHD Degree Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave													
6.c NUMBER OF WORKING DAYS APPLIED FOR 1 day Inclusive Dates 06/27/2023 - 06/27/2023		6.d COMMUTATION <input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested  RATILLA, TEODOMERO C. (Signature of Applicant)													
7. DETAILS OF ACTION ON APPLICATION															
7.a CERTIFICATION OF LEAVE CREDITS AS of: <u>June 2023</u> <table border="1"><thead><tr><th></th><th>Vacation Leave</th><th>Sick Leave</th></tr></thead><tbody><tr><td>Total Earned</td><td>297.155</td><td>287.708</td></tr><tr><td>Less this Application</td><td></td><td></td></tr><tr><td>Balance</td><td>297.155</td><td>286.708</td></tr></tbody></table> HONEY SOFIA V. COLIS Human Resource Management Office			Vacation Leave	Sick Leave	Total Earned	297.155	287.708	Less this Application			Balance	297.155	286.708	7.b RECOMMENDATION: <input type="checkbox"/> For Approval <input type="checkbox"/> For Disapproval due to:  RUTH O. ESCASINAS Department of Agronomy	
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7.c APPROVED FOR: ____ day(s) with pay ____ day(s) without pay Others (Specify):		7.d DISAPPROVED due to:													
 EDGARDO E. TULIN (Printed Name and Signature) University President															



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