



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		Cagande		Loreme	Silmaro									
3. DATE OF FILING		4. POSITION		5. SALARY (Monthly)										
08/04/2023		Instructor I												
<b>6. DETAILS OF APPLICATION</b>														
6.a TYPE OF LEAVE TO BE AVAILED OF:			6.b DETAILS OF LEAVE:											
<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 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: <u>CDO</u>			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 type="checkbox"/> Out Patient (Pls. Specify) :  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			6.d COMMUTATION											
9 days Inclusive Dates 08/10/2023 - 08/22/2023			<input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested  <u>CAGANDE, LOREME S.</u> (Signature of Applicant)											
<b>7. DETAILS OF ACTION ON APPLICATION</b>														
7.a CERTIFICATION OF LEAVE CREDITS			7.b RECOMMENDATION:											
AS of: August 2023														
<table border="1"> <tr> <td>Total Earned</td> <td>Vacation Leave</td> <td>Sick Leave</td> </tr> <tr> <td>Less this Application</td> <td></td> <td></td> </tr> <tr> <td>Balance</td> <td></td> <td></td> </tr> </table>			Total Earned	Vacation Leave	Sick Leave	Less this Application			Balance			<input type="checkbox"/> For Approval <input type="checkbox"/> For Disapproval due to:  <u>DIONESIO M. BAÑOC</u> Department of Agronomy		
Total Earned	Vacation Leave	Sick Leave												
Less this Application														
Balance														
7.c APPROVED FOR:			7.d DISAPPROVED due to:											
day(s) with pay    day(s) without pay Others (Specify):														
<div style="display: flex; justify-content: space-between;"> <div> <b>FLORANTE G. DIDAL</b>            Payroll and Leave Benefits Office         </div> <div> <b>EDCARDO E. TULIN</b>            (Printed Name and Signature)            University President         </div> </div>														