

1. OFFICE/DEPARTMENT	2. NAME : (Last)	(First)	(Middle)												
Department of Meteorology	Abanera	Felix	C.												
3. DATE OF FILING <u>May 11, 2022</u>	4. POSITION <u>Admin Aide III</u>														
6. DETAILS OF APPLICATION															
6.A TYPE OF LEAVE TO BE AVAILED OF <input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input checked="" type="checkbox"/> Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input 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) <i>Others:</i> <u>Emergency Calamity Leave</u>		6.B DETAILS OF LEAVE <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													
6.C NUMBER OF WORKING DAYS APPLIED FOR <u>2</u> INCLUSIVE DATES <u>May 12 -13, 2022</u>		6.D COMMUTATION Not Requested Requested _____ (Signature of Applicant)													
7. DETAILS OF ACTION ON APPLICATION															
7.A CERTIFICATION OF LEAVE CREDITS As of _____ <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 30%;"></td> <td style="width: 35%;">Vacation Leave</td> <td style="width: 35%;">Sick Leave</td> </tr> <tr> <td><i>Total Earned</i></td> <td></td> <td></td> </tr> <tr> <td><i>Less this application</i></td> <td></td> <td></td> </tr> <tr> <td><i>Balance</i></td> <td></td> <td></td> </tr> </table> <div style="text-align: center;"> <u>HONEY SOFIA V. COLIS</u> OIC Director, ODHRM </div>			Vacation Leave	Sick Leave	<i>Total Earned</i>			<i>Less this application</i>			<i>Balance</i>			7.B RECOMMENDATION For approval For disapproval due to _____ _____ _____ <div style="text-align: center;"> <u>CHARLIE S. ANDAN</u> Head, Department of Meteorology </div>	
	Vacation Leave	Sick Leave													
<i>Total Earned</i>															
<i>Less this application</i>															
<i>Balance</i>															
7.C APPROVED FOR: ____ days with pay ____ days without pay ____ others (Specify)		7.D DISAPPROVED DUE TO: _____ _____ _____													
<u>EDGARDO E. TULIN</u> President															