



## **DEPARTMENT OF LIBERAL ARTS AND BEHAVIORAL SCIENCES**

Visca Baybay City, Leyte 6521-A, Philippines Phone: +63 53 565-0600 loc.1028 Email:: dlabs@vsu.edu.ph

Website: vsu.edu.ph

## CHECKLIST OF REQUIREMENTS FOR ISSUANCE OF APPOINTMENT

Fill up the required listed fo	orms & gather your docu se submit the checked	ments in order of the check items.	klist & submit to our	office on or befo	re
Type of Appointment:					
New Appointment	□ Renewal	□ Promotion	□ Others		
Name of Appointee: JUSTIN A	ANDREW A PLANCO				
Office/Unit/Department: DLAB					
I. Government forms for	completion:			REMARKS	DATE RECEIVED
1 Personal Data Shee	et -PDS CSC Form 212	(Revised 2017) w/ 2 ID p	icture (latest)		
		copy, it must be in the long			
	s with 2 sneets (attach v Form (PDF) in 2 copies	vork experience sheet) in 2	2 copies		
	gned by the head of off			elaines rethouvorpaud recino Parconing et las Effektel III da Leen essa basealles et la	assistation tables and removement of the reduction of the removement of the residence of th
3 Oath of Office in 2 co	opies			AZENDO DE COMPOSE E DE SENSE EN DE CONSENSA EN MODERNA DE COMPOSE	
	the Head of Agency				
4_Certificate of Nepotis	sm in ∠ copies o administrative position				*
	ption to Duty in 2 copie				
Note: Must be sig	gned by the immediate s	upervisor or head of office	•		
	& Liabilities (SALN) in 2			designation of the control of the co	atmito/smitofresh responds sees consistent of the sees were stated
Note: Must be no	tarized and latest SALN				
II Additional documents	for submission:				
1 Approved recommen	ndation				
2 NBI Clearance					-
	blood test, urinalysis,	chest x-ray, drug test)			
4 Clearance (for trans 5 Performance Rating					
for promotion (2					
for transferee (la	atest rating period)				*
6 Approved transfer (fo		·			
Certification of leave credit balance (for transferee)  Service Record (for transferee)					
9 NEURO EXAM (for		d only)			
		cated copy from school in 2	2 copies		
		enticated copy from CSC)			
		y Guards, Drivers, & etc.) i	n 2 copies		
13 Marriage Certificate (14 Birth Certificate (PS)				***************************************	
15. Phil. Health No.	, ,			CONTRACTOR OF THE STATE OF THE	***************************************
16. TIN No.					
17. PAG-IBIG ID No.					
18 Application Letter (V	acant position)				
			1	Waran	N. C.
			·X	Mono	
				SIGNATURE	
Verified by:					
ODHRM	Staff				
II (IV)					