



Republic of the Philippines
VISAYAS STATE UNIVERSITY
Visca, Baybay City, Leyte

Stamp of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT LIBRARY	2. NAME : (Last) (First) (Middle) IGOT JR. TIRSO E.													
3. DATE OF FILING January 4, 2022														
4. POSITION ADMINISTRATIVE AIDE		5. PAY P 0.00												
6. DETAILS OF APPLICATION														
<div style="display: flex;"> <div style="flex: 1; padding-right: 10px;"> <p>6.A TYPE OF LEAVE TO BE AVAILED OF</p> <p><input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Sick Leave (Sec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Maternity Leave (R.A. No. 11210 / IRR issued by CSC, DOLE and SSS)</p> <p><input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended)</p> <p><input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Solo Parent Leave (R.A. No. 8972 / CSC MC No. 8, s. 2004)</p> <p><input type="checkbox"/> Study Leave (Sec. 68, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> 10-Day VAWC Leave (R.A. No. 9262 / CSC MC No. 15, s. 2005)</p> <p><input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Special Leave Benefits for Women (R.A. No. 9710 / CSC MC No. 25, s. 2010)</p> <p><input type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended)</p> <p><input type="checkbox"/> Adoption Leave (R.A. No. 8552)</p> <p>Others: MONITIZATION (10Days)</p> </div> <div style="flex: 1;"> <p>6.B DETAILS OF LEAVE</p> <p><i>In case of Vacation/Special Privilege Leave:</i> Within the Philippines Residence Abroad (Specify) _____</p> <p><i>In case of Sick Leave:</i> In Hospital (Specify Illness) _____ Out Patient (Specify Illness) _____</p> <p><i>In case of Special Leave Benefits for Women:</i> (Specify Illness) _____</p> <p><i>In case of Study Leave:</i> Completion of Master's Degree BAR/Board Examination Review</p> <p><i>Other purpose:</i> Monetization of Leave Credits Terminal Leave</p> </div> </div>														
<p>6.C NUMBER OF WORKING DAYS APPLIED FOR 10 days INCLUSIVE DATES _____</p>		<p>6.D COMMUTATION Not Requested Requested TIRSO E. IGOT JR. (Signature of Applicant)</p>												
7. DETAILS OF ACTION ON APPLICATION														
<p>7.A CERTIFICATION OF LEAVE CREDITS As of _____</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> </thead> <tbody> <tr> <td>Total Earned</td> <td></td> <td></td> </tr> <tr> <td>Less this application</td> <td></td> <td></td> </tr> <tr> <td>Balance</td> <td></td> <td></td> </tr> </tbody> </table> <p>REGINA BIBERA, Adm. Officer II (Authorized Officer)</p>			Vacation Leave	Sick Leave	Total Earned			Less this application			Balance			<p>7.B RECOMMENDATION For approval For disapproval due to _____</p> <p>VICENTE A. GILOS Office of the Chief Librarian (Authorized Officer)</p>
	Vacation Leave	Sick Leave												
Total Earned														
Less this application														
Balance														
<p>7.C APPROVED FOR: _____ days with pay _____ days without pay _____ others (Specify) _____</p>		<p>7.D DISAPPROVED DUE TO: _____ _____ _____</p>												
<p>EDGARDO E. TULIN President (Authorized Official)</p>														