Form No. 6
0

ANNEX A

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)
FARMI	**Lusanta**	**Dhenber**	**Castil**
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
08/11/2022	**Instructor III**		

6. DETAILS OF APPLICATION

6.a TYPE OF LEAVE TO BE AVAILED OF:

- ☐Adoption
- ☐Mandatory/Force
- ☐Maternity
- ☐Maternity - 7 days Transferable to father/alternate caregiver
- ☐Maternity - additional 15 days for single mother
- ☐Monetization
- ☐Parental (Solo Parent)
- ☐Paternity
- ☐Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)
- ☐Sabbatical
- ☐Sick
- ☐Special Emergency (Calamity)
- ☐Special Leave Benefits for women
- ☐Special Leave Privilege
- ☐Study
- ☐VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)
- ☐Vacation

Others: COVID-19 Vaccination Leave

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:
- ☐ Within the Philippines :
- ☐ Abroad (Pls. Specify) :

In case of Sick leave:
- ☐ In Hospital (Pls. Specify) :
- ☐ Out Patient (Pls. Specify) :

In case of Special Leave Benefits for Women:
(Specify Illness)

In case of Study leave:
- ☐ Completion of Master's Degree
- ☐ BAR/Board Examination Review

Other purpose:
- ☐ Monetization of Leave Credits
- ☐ Terminal Leave

6.c NUMBER OF WORKING DAYS APPLIED FOR

1 day

Inclusive Dates

08/10/2022 - 08/10/2022

6.d COMMUTATION

☒ Requested ☐ Not Requested

LUSANTA, DHENBER C.
(Signature of Applicant)

7. DETAILS OF ACTION ON APPLICATION

7.a CERTIFICATION OF LEAVE CREDITS

AS of: August 2022

	Vacation Leave	Sick Leave
Total Earned		
Less this Application		
Balance		

REGINA C. BIBERA
Office of the Head of Payroll and Leave Benefits

7.b RECOMMENDATION:

☐ For Approval

☐ For Disapproval due to:

MARIA JULIET C. CENIZA
Office of the Vice President for Research, Extension and Innovation

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