



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)
CaO	Calunangan	Fe	Cruza
3. DATE OF FILING	4. POSITION	5. SALARY (Monthly)	
12/08/2022	Administrative Aide IV		

**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: \_\_\_\_\_

**6.b DETAILS OF LEAVE:**

In case of vacation/Special Privilege leave:

- ☒ Within the Philippines : one day  
☐ 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:

- ☐ BAR/Board Examination Review  
☐ Completion of Master's Degree  
☐ Completion of Doctorate Degree  
☐ Completion of PHD Degree

Other purpose:

- ☐ Monetization of Leave Credits  
☐ Terminal Leave

**6.c NUMBER OF WORKING DAYS APPLIED FOR**

1 day  
Inclusive Dates

12/12/2022 - 12/12/2022

**6.d COMMUTATION**

- ☒ Requested    ☐ Not Requested

*Calunangan*  
**CALUNANGAN, FE C.**  
(Signature of Applicant)

**7. DETAILS OF ACTION ON APPLICATION****7.a CERTIFICATION OF LEAVE CREDITS**AS of: December 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:

*Queen Ever Y. Atupan*  
**QUEEN EVER Y. ATUPAN**  
Office of the Cashier

**7.c APPROVED FOR:**

1 day(s) with pay        day(s) without pay  
Others (Specify):

**7.d DISAPPROVED due to:***Edgardo E. Tulin*  
**EDGARDO E. TULIN**

(Printed Name and Signature)  
University President