

DAILY TIME RECORD

ALCOBER, ED ALIAN L.
(NAME)

For the month of
July 1 - 31, 2023
Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-SAT						Off
2-SUN						Off
3-MON	8:10	12:18	12:19	5:08	10mins	7hrs 50mins
4-TUE	7:50	12:19	12:41	5:09		8hrs
5-WED	7:54	12:00	12:47	5:15		8hrs
6-THU	7:59	12:05	12:57	5:06		8hrs
7-FRI	7:55	12:00	12:55	5:10		8hrs
8-SAT						Off
9-SUN						Off
10-MON	8:06	12:04	12:13	5:03	6mins	7hrs 54mins
11-TUE	7:57	12:02	12:48	5:15		8hrs
12-WED	8:03	12:05	1:02	5:15	5mins	7hrs 55mins
13-THU	8:04	12:01	1:00	5:20	4mins	7hrs 56mins
14-FRI	7:53	12:04	12:13	5:20		8hrs
15-SAT						Off
16-SUN						Off
17-MON						SPL
18-TUE	7:48	12:11	12:51	5:13		8hrs
19-WED	8:06	12:04	1:02	5:44	8mins	7hrs 52mins
20-THU	8:02	12:07	1:00	5:49	2mins	7hrs 58mins
21-FRI	7:10	12:05	12:58	5:47		8hrs
22-SAT						Off
23-SUN						Off
24-MON						OB
25-TUE						OB
26-WED	7:54	12:05	12:48	5:16		8hrs
27-THU	8:11	12:12	12:53	5:05	11mins	7hrs 49mins
28-FRI	8:12	12:05	12:32	5:08	12mins	7hrs 48mins
29-SAT						Off
30-SUN						Off
31-MON	8:00	12:48	12:49	5:19		8hrs

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

ED ALIAN L. ALCOBER

VERIFIED as to prescribed office hours

fr: DIONESIO M. BAÑOC
Department Head
Department of Agronomy

Philippines

C UNIVERSITY

ly, Leyte

FOR LEAVE

) (Middle)

llan Llano

5. SALARY (Monthly)

ssor IV

APPLICATION

DETAILS OF LEAVE:

use of vacation/Special Privilege leave:

Within the Philippines : LEYTELEYEL LEYTELEYELL

Abroad (Pls. Specify) :

ase of Sick leave:

In Hospital (Pls. Specify) :

Out Patient (Pls. Specify) :

ase of Special Leave Benefits for Women:

activity Illness)

ase of Study leave:

BAR/Board Examination Review

Completion of Master's Degree

Completion of Doctorate Degree

Completion of PHD Degree

ter purpose:

Monetization of Leave Credits

Terminal Leave

COMMUTATION

Requested ☐ Not Requested

ALCOBER, ED ALIAN L.

(Signature of Applicant)

ON APPLICATION

RECOMMENDATION:

☒ For Approval

☐ For Disapproval due to:

fr: DIONESIO M. BAÑOC
Department of Agronomy

DISAPPROVED due to:

E. TULIN
nd Signature)
President



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)												
DA	Alcober		Ed Allan	Llano												
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)													
07/16/2023	Associate Professor IV															
6. DETAILS OF APPLICATION																
6.a TYPE OF LEAVE TO BE AVAILED OF:		6.b DETAILS OF LEAVE:														
<input type="checkbox"/> Adoption <input type="checkbox"/> Mandatory/Force <input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver <input type="checkbox"/> Maternity - additional 15 days for single mother <input type="checkbox"/> Monetization <input type="checkbox"/> Parental (Solo Parent) <input type="checkbox"/> Paternity <input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Sabbatical <input type="checkbox"/> Sick <input type="checkbox"/> Special Emergency (Calamity) <input type="checkbox"/> Special Leave Benefits for women <input checked="" type="checkbox"/> Special Leave Privilege <input type="checkbox"/> Study <input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Vacation Others: _____		In case of vacation/Special Privilege leave: <input checked="" type="checkbox"/> Within the Philippines : LEYTELEYEL LEYTELEYELL <input type="checkbox"/> Abroad (Pls. Specify) : _____ In case of Sick leave: <input type="checkbox"/> In Hospital (Pls. Specify) : _____ <input type="checkbox"/> Out Patient (Pls. Specify) : _____ In case of Special Leave Benefits for Women: (Specify Illness) _____ In case of Study leave: <input type="checkbox"/> BAR/Board Examination Review <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> Completion of Doctorate Degree <input type="checkbox"/> Completion of PHD Degree Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave														
6.c NUMBER OF WORKING DAYS APPLIED FOR		6.d COMMUTATION														
1 day Inclusive Dates 07/17/2023 - 07/17/2023		<input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested ALCOBER, ED ALLAN L. (Signature of Applicant)														
7. DETAILS OF ACTION ON APPLICATION																
7.a CERTIFICATION OF LEAVE CREDITS		7.b RECOMMENDATION:														
AS of: July 2023		<input checked="" type="checkbox"/> For Approval <input type="checkbox"/> For Disapproval due to: _____														
<table border="1"> <tr> <td></td> <td>Vacation Leave</td> <td>Sick Leave</td> </tr> <tr> <td>Total Earned</td> <td>110.908</td> <td>178.784</td> </tr> <tr> <td>Less this Application</td> <td></td> <td></td> </tr> <tr> <td>Balance</td> <td>110.908</td> <td>178.784</td> </tr> </table>			Vacation Leave	Sick Leave	Total Earned	110.908	178.784	Less this Application			Balance	110.908	178.784	DIONESIO M. BAÑOC Department of Agronomy		
	Vacation Leave	Sick Leave														
Total Earned	110.908	178.784														
Less this Application																
Balance	110.908	178.784														
7.c APPROVED FOR:		7.d DISAPPROVED due to:														
1 day(s) with pay day(s) without pay Others (Specify): _____																
EDGARDO E. TULIN (Printed Name and Signature) University President																