## Republic of the Philippines

## VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

Stamp of Date of Receipt

## APPLICATION FOR LEAVE

I. OFFICE/DEPT./DIVISION	Name (Last)	A Appendix	(First)	(Middle)
CaO	Calunangan		Fe Cruza	
B. DATE OF FILING	LING 4. POSITION			5. SALARY (Monthly)
07/27/2022	A	dministrative	Aide IV	landatory/i aread leave
by relevant togeths each as the police	6. 1	DETAILS OF	APPLICATION	year. In case the echoquied leave has been capacell
6.a TYPE OF LEAVE TO BE AVAILED OF:			6.b DETAILS OF LEAVE:	
□ 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:			In case of vacation/Special Privilege leave:  ☑ Within the Philippines: personal  ☐ 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  0.5 days Inclusive Dates  07/27/2022 - 07/27/2022			6.d COMMUTATION  Requested Not Requested  CALUNANGAN, FE C.  (Signature of Applicant)	
a of columby and by the proper	7. DETAI	LS OF ACTIO	N ON APPLICATIO	N
AS of: July 2022			7.b RECOMMENDATION:	
and to wrome or the control for the second failt of	Vacation Leave	Sick Leave	□ For Approval	
Total Earned	I of the agency stating th	ad	D For Discount	val due to
Less this Application	Annual Inste	to Tall	☐ For Disappro	var due to:
Balance	langines a seguigrae to be	M		ATTE Searce - 16 days
REGINA C. BIBERA Office of the Head of Payroll and Leave Benefits			QU	Office of the Cashier
7.c APPROVED FOR:  day(s) with pay day(s) without pay Others (Specify):			7.d DISAPPROVEI	due to:
ntaker motory property and work-relate	companied by a detreen	EDGARDO (Printed Name a University	nd Signature)	e leave of alternoo for thirty (30) calesons days on a