


**DAILY TIME RECORD**  
**EDULLANTES, MELODINA P.**  
 (NAME)

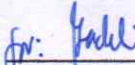
For the month of  
**July 1 - 31, 2022**  
 Official hours for arrival and departure  
**8:00AM - 5:00PM**

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-FRI	8:00	12:00	1:00	5:00		8hrs
2-SAT						Off
3-SUN						Off
4-MON	7:48	12:04	12:22	5:12		8hrs
5-TUE	6:50	12:16	12:44	5:03		8hrs
6-WED	8:00	12:00	1:00	5:00		8hrs
7-THU	7:27	12:02	12:14	5:05		8hrs
8-FRI	7:06	12:18	12:38	5:01		8hrs
9-SAT						Off
10-SUN						Off
11-MON						VL
12-TUE						VL
13-WED						VL
14-THU	8:00	12:00	1:00	5:00		8hrs
15-FRI	8:00	12:00	1:00	5:00		8hrs
16-SAT						Off
17-SUN						Off
18-MON						SL
19-TUE	7:41	12:06	12:23	5:05		8hrs
20-WED	8:00	12:00	1:00	5:00		8hrs
21-THU	8:00	12:00	1:00	5:07		8hrs
22-FRI	7:33	12:23	12:28	5:00		8hrs
23-SAT						Off
24-SUN						Off
25-MON						SL
26-TUE	7:08	12:01	12:04	5:10		8hrs
27-WED						OB
28-THU						OB
29-FRI						OB
30-SAT						Off
31-SUN						Off

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.

  
**MELODINA P. EDULLANTES**

VERIFIED as to prescribed office hours


  
**LILIAN B. NUÑEZ**  
 Department Head  
 Barangay Integrated Development Approach for Nutrition Improvement

**DAILY TIME RECORD**  
**EDULLANTES, MELODINA P.**  
 (NAME)

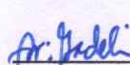
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**LILIAN B. NUÑEZ**  
 Department Head  
 Barangay Integrated Development Approach for Nutrition Improvement



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)
<b>BIDANI</b>	<b>Edullantes</b>	<b>Melodina</b>	<b>Petilos</b>
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
<b>07/05/2022</b>	<b>Science Research Specialist I</b>		

**6. DETAILS OF APPLICATION**

<p>6.a TYPE OF LEAVE TO BE AVAILED OF:</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Mandatory/Force</p> <p><input type="checkbox"/> Maternity</p> <p><input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver</p> <p><input type="checkbox"/> Maternity - additional 15 days for single mother</p> <p><input type="checkbox"/> Monetization</p> <p><input type="checkbox"/> Parental (Solo Parent)</p> <p><input type="checkbox"/> Paternity</p> <p><input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Sabbatical</p> <p><input type="checkbox"/> Sick</p> <p><input type="checkbox"/> Special Emergency (Calamity)</p> <p><input type="checkbox"/> Special Leave Benefits for women</p> <p><input type="checkbox"/> Special Leave Privilege</p> <p><input type="checkbox"/> Study</p> <p><input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)</p> <p><input checked="" type="checkbox"/> Vacation</p> <p>Others: _____</p>	<p>6.b DETAILS OF LEAVE:</p> <p>In case of vacation/Special Privilege leave:</p> <p><input checked="" type="checkbox"/> Within the Philippines : <u>Northern Samar</u></p> <p><input type="checkbox"/> Abroad (Pls. Specify) :</p> <p>In case of Sick leave:</p> <p><input type="checkbox"/> In Hospital (Pls. Specify) :</p> <p><input type="checkbox"/> Out Patient (Pls. Specify) :</p> <p>In case of Special Leave Benefits for Women: (Specify illness)</p> <p>In case of Study leave:</p> <p><input type="checkbox"/> Completion of Master's Degree</p> <p><input type="checkbox"/> BAR/Board Examination Review</p> <p>Other purpose:</p> <p><input type="checkbox"/> Monetization of Leave Credits</p> <p><input type="checkbox"/> Terminal Leave</p>
<p>6.c NUMBER OF WORKING DAYS APPLIED FOR</p> <p><u>3 days</u></p> <p>Inclusive Dates</p> <p><u>07/11/2022 - 07/13/2022</u></p>	<p>6.d COMMUTATION</p> <p><input checked="" type="checkbox"/> Requested    <input type="checkbox"/> Not Requested</p> <p><u>EDULLANTES, MELODINA P.</u></p> <p>(Signature of Applicant)</p>

**7. DETAILS OF ACTION ON APPLICATION**

<p>7.a CERTIFICATION OF LEAVE CREDITS</p> <p>AS of: <u>July 2022</u></p> <table border="1"> <thead> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> </thead> <tbody> <tr> <td>Total Earned</td> <td>36.693</td> <td>1.583</td> </tr> <tr> <td>Less this Application</td> <td></td> <td></td> </tr> <tr> <td>Balance</td> <td>33.693</td> <td>1.583</td> </tr> </tbody> </table> <p><b>REGINA C. BIBERA</b></p> <p>Office of the Head of Payroll and Leave Benefits</p>		Vacation Leave	Sick Leave	Total Earned	36.693	1.583	Less this Application			Balance	33.693	1.583	<p>7.b RECOMMENDATION:</p> <p><input type="checkbox"/> For Approval</p> <p><input type="checkbox"/> For Disapproval due to:</p> <p><u>LILIAN B. NUÑEZ</u></p> <p>Institute for Strategic Research &amp; Development Studies</p>
	Vacation Leave	Sick Leave											
Total Earned	36.693	1.583											
Less this Application													
Balance	33.693	1.583											
<p>7.c APPROVED FOR:</p> <p>____ day(s) with pay    ____ day(s) without pay</p> <p>Others (Specify):</p>	<p>7.d DISAPPROVED due to:</p>												

**EDGARDO E. TULIN**

(Printed Name and Signature)  
University 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)
<b>BIDANI</b>	<b>Edullantes</b>	<b>Melodina</b>	<b>Petilos</b>
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)
<b>07/19/2022</b>	<b>Science Research Specialist I</b>		

**6. DETAILS OF APPLICATION**

<p>6.a TYPE OF LEAVE TO BE AVAILED OF:</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Mandatory/Force</p> <p><input type="checkbox"/> Maternity</p> <p><input type="checkbox"/> Maternity - 7 days Transferable to father/alternate caregiver</p> <p><input type="checkbox"/> Maternity - additional 15 days for single mother</p> <p><input type="checkbox"/> Monetization</p> <p><input type="checkbox"/> Parental (Solo Parent)</p> <p><input type="checkbox"/> Paternity</p> <p><input type="checkbox"/> Rehabilitation (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292)</p> <p><input type="checkbox"/> Sabbatical</p> <p><input checked="" type="checkbox"/> Sick</p> <p><input type="checkbox"/> Special Emergency (Calamity)</p> <p><input type="checkbox"/> Special Leave Benefits for women</p> <p><input type="checkbox"/> Special Leave Privilege</p> <p><input type="checkbox"/> Study</p> <p><input type="checkbox"/> VAWC (RA No. 9262 / CSC MC No. 15, s. 2005)</p> <p><input type="checkbox"/> Vacation</p> <p>Others: _____</p>	<p>6.b DETAILS OF LEAVE:</p> <p>In case of vacation/Special Privilege leave:</p> <p><input type="checkbox"/> Within the Philippines :</p> <p><input type="checkbox"/> Abroad (Pls. Specify) :</p> <p>In case of Sick leave:</p> <p><input type="checkbox"/> In Hospital (Pls. Specify) :</p> <p><input checked="" type="checkbox"/> Out Patient (Pls. Specify) : <u>home medication</u></p> <p>In case of Special Leave Benefits for Women: (Specify Illness)</p> <p>In case of Study leave:</p> <p><input type="checkbox"/> Completion of Master's Degree</p> <p><input type="checkbox"/> BAR/Board Examination Review</p> <p>Other purpose:</p> <p><input type="checkbox"/> Monetization of Leave Credits</p> <p><input type="checkbox"/> Terminal Leave</p>
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<p>6.c NUMBER OF WORKING DAYS APPLIED FOR</p> <p><u>1 day</u></p> <p>Inclusive Dates</p> <p><u>07/18/2022 - 07/18/2022</u></p>	<p>6.d COMMUTATION</p> <p><input checked="" type="checkbox"/> Requested    <input type="checkbox"/> Not Requested</p> <p><u>EDULLANTES, MELODINA P.</u></p> <p>(Signature of Applicant)</p>
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	Vacation Leave	Sick Leave											
Total Earned	34.9	2.167											
Less this Application													
Balance	34.900	1.167											

<p>7.c APPROVED FOR:</p> <p>____ day(s) with pay    ____ day(s) without pay</p> <p>Others (Specify): _____</p>	<p>7.d DISAPPROVED due to:</p>
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EDGARDO E. TULIN

(Printed Name and Signature)

University President



Republic of the Philippines  
**VISAYAS STATE UNIVERSITY**  
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**APPLICATION FOR LEAVE**

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<b>BIDANI</b>	<b>Edullantes</b>	<b>Melodina</b>	<b>Petilos</b>												
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)												
<b>07/26/2022</b>	<b>Science Research Specialist I</b>														
<b>6. DETAILS OF APPLICATION</b>															
6.a TYPE OF LEAVE TO BE AVAILED OF: <input type="checkbox"/> Adoption <input type="checkbox"/> Mandatory/Force <input type="checkbox"/> Maternity <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 checked="" type="checkbox"/> Sick <input type="checkbox"/> Special Emergency (Calamity) <input type="checkbox"/> Special Leave Benefits for women <input 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: _____		6.b DETAILS OF LEAVE:  In case of vacation/Special Privilege leave: <input type="checkbox"/> Within the Philippines : <input type="checkbox"/> Abroad (Pls. Specify) :  In case of Sick leave: <input type="checkbox"/> In Hospital (Pls. Specify) : <input checked="" type="checkbox"/> Out Patient (Pls. Specify) : <u>Home Medication</u>  In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study leave: <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> BAR/Board Examination Review  Other purpose: <input type="checkbox"/> Monetization of Leave Credits <input type="checkbox"/> Terminal Leave													
6.c NUMBER OF WORKING DAYS APPLIED FOR  <div style="text-align: center;">1 day Inclusive Dates  07/25/2022 - 07/25/2022</div>		6.d COMMUTATION  <input checked="" type="checkbox"/> Requested <input type="checkbox"/> Not Requested  <div style="text-align: center;">   <b>EDULLANTES, MELODINA P.</b>          (Signature of Applicant)       </div>													
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