

CS Form No. 33-B
Revised 2018

(Stamp of Date of Receipt)

Republic of the Philippines
VISAYAS STATE UNIVERSITY
Baybay City, Leyte

Mr./Mrs./Ms.: KRYSTAL KRISTIA MAE P. GONZALES

You are hereby appointed as Instructor I (SG 12, Step 1) (Microbiology)
(Position Title)

under Permanent status at the Department of Biological Sciences
(Permanent, Temporary, etc.) (Office/Department/Unit)

with a compensation rate of THIRTY-TWO THOUSAND TWO HUNDRED FORTY-FIVE

(₱ 32,245.00) pesos per month.

The nature of this appointment is Reappointment vice N/A
(Original, Promotion, etc.)

who N/A with plantilla Item No. VISCAB-INST1-25-2012 Page 32 of 42 pp.
(Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing officer/authority.

Very truly yours,



PROSE IVY G. YEPES
Appointing Officer/Authority

July 18, 2025
Date of Signing

Accredited/Deregulated Pursuant to
CSC Resolution No. 1801514, s. 2018
dated 12/18/2018

DRY SEAL

(Stamp of Date of Receipt)

SUBJECT TO SIX (6) MONTHS PROBATIONARY PERIOD
per 2018 approved VSU MSP

Certification

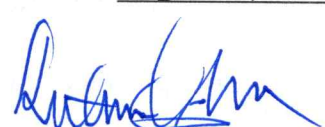
This is to certify that all requirements and supporting papers pursuant to **CSC MC No. 24, s. 2017** as amended have been compiled with, reviewed and found to be in order.

The position was published at _____ N/A _____ from _____, 20__ to _____, 20__ and posted in _____ N/A _____ from _____ to _____, 20__ in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on August 07, 2025.


HONEY SOFIA V. COLIS
HRMO

Certification

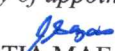
This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/**Placement Committee** during the deliberation held on August 07, 2025.


ROTACIO S. GRAVOSO
Chairperson, HRMPSB/**Placement Committee**

CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
<input type="checkbox"/> Validated per RAI for the month of _____			
<input type="checkbox"/> Invalidated per CSCRO/FO letter dated _____			
<input type="checkbox"/> Appeal	DATE FILED	STATUS	
<input type="checkbox"/> CSCRO/CSC-Commission			
<input type="checkbox"/> Petition for Review			
<input type="checkbox"/> CSC-Commission			
<input type="checkbox"/> Court of Appeals			
<input type="checkbox"/> Supreme Court			

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement
Received original/photocopy of appointment on 07/18/25

KRYSTAL KRISTIA MAE P. GONZALES
Appointee