
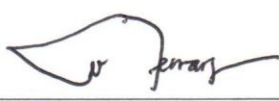


REPUBLIC OF THE PHILIPPINES BC-CSC FORM NO. 1 (POSITION DESCRIPTION FORM)		1. NAME OF EMPLOYEE Resos Julien A. (FAMILY NAME) (GIVEN NAME) (MI)																						
2. DEPT./CORP. OR AGENCY/LOCAL GOV'T. Visayas State University		3. BUREAU OR OFFICE																						
4. DEPT./BRANCH/DIVISION Department of Plant Breeding and Genetics		5. WORK STATION/PLACE OF WORK Department of Plant Breeding and Genetics																						
6.a. Pres. Approp. Act. Board Res./ Ord. No. Item No.	6.b. Prev. Approp. Act. Board Res./ Ord. No. Item No.	7.a. Salary Authorized: P 19 940.00 Actual: P 16 811.43	7.b. Other Compensation; PERA & ACA P 2 000.00																					
8. OFFICIAL DESIGNATION OF POSITION Instructor I		9. WORKING OR PROPOSED TITLE																						
10.WAPCO CLASSIFICATION OF THIS POSITION		11.OCCUPATIONAL GROUP TITLE (leave blank)																						
12.FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENTAL UNIT AND UNIT'S CLASS																								
<table><tr><td colspan="2">MUNICIPALITY</td><td colspan="2">CITY</td><td colspan="3">PROVINCE</td></tr><tr><td>1ST</td><td>2ND</td><td>3RD</td><td>4TH</td><td>5TH</td><td>6TH</td><td>7TH</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table>				MUNICIPALITY		CITY		PROVINCE			1 ST	2 ND	3 RD	4 TH	5 TH	6 TH	7 TH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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13. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attach additional sheet/s.																								
PERCENT OF WORKING TIME	DUTIES																							
	On Study Leave																							

14. POSITION TITLE OF IMMEDIATE SUPERVISOR Department Head		15. POSITION TITLE OF NEXT HIGHER SUPERVISOR College Dean	
16. NAMES, TITLE AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE (If more than 7, list only by their item nos. and titles) None			
17. MACHINES, EQUIPMENTS, TOOLS, etc. used regularly in the performance of work. None			
18. CONTACTS		19. WORKING CONDITIONS	
General Public	Occasional	Frequent	Normal working condition
Other Agencies			Field Work
Supervisors			Field Trips
Management			Exposed to varied weather
Others (Specify)			Others (Specify)
20. I CERTIFY THAT THE ABOVE ANSWERS ARE ACCURATE AND COMPLETE.			
September 1, 2014			
DATE		SIGNATURE OF EMPLOYEE	
TO BE FILLED OUT BY IMMEDIATE SUPERVISOR			
21. Describe briefly the general function of the Unit or Section.			
22. Describe briefly the general function of the position.			
23.a. Indicate the required qualifications by years and kind of education Considered in filling up a vacancy for this position. (Keep the position in mind rather than the qualifications of the present incumbent. This item should be filled for all positions other than teaching.) Education: _____ Experience: _____			
22.b. Licenses or Certificates required to do this work, if any.			
23. I HEREBY CERTIFY THAT THE ABOVE ANSWERS ARE ACCURATE AND COMPLETE.			
5 September 2014			
DATE		SIGNATURE AND TITLE OF IMMEDIATE SUPERVISOR	
24. APPROVED:			
DATE		HEAD OF AGENCY	