RI	EPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1	1. NAME OF EMPLOYEE
(1	Position Description Form)	CTMATRANCA LYNEPTE CANO (Family Name) (Middle Nam
GOVER		L 3. BUREAU OR OFFICE
	s State University, Baybay City, Leyte	
4. DEPT.	/BRANCH/DIVISION	5. WORK STATION/PLACE OF WORK
6a. PRES. AN ACT/	ACT/	7a. SALARY P.A.:
ORD. NO ITEM NO	ORD. NO.	7b. OTHER COMPENSATION: P 24,000.00
8. OFFIC	IAL DESIGNATION OF POSITION	9. WORKING PROPOSED TITLE
	nstructor I	3.6
10. WAPCO	CLASSIFICATION OF THIS POSITION	11. OCCUPATION GROUP TITLE (leave blank)
	hed additional sheets	ES. If more space is needed, please
Percent of Working Time		ruhdnæsk si
Percent of Working Tim	Teaches assigned subject and per among others the following: a) Prepared teaching materian b) Conducts examination (middle) Checks test papers and red by Submits grade sheet and the two weeks after final examination (middle)	reforms other teaching related function als/guides and submit to department head a/final/long hours/quizzes). Eturn 1 week after exam. Eurn over class records to department head amination.
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14.	POSITION TITLE OF IMME	DIATE SUPERVISOR	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR		
	Department Head		College Dean		
16.	NAMES, TITLES AND ITEM only by their item nos. and	M NOS. OF THOSE YOU titles)	DIRECTLY SUPERVISE (if more than (7), list		
17.	MACHINES, EQUIPMENT,	TOOLS, etc. used re	egularly in performance of work.		
	computer, printer	, pens, etc.	19. WORKING CONDITION		
18.		sional Frequent X] []] []	19. WORKING CONDITION Normal Working Condition [X] Field Work [] Field Trips [] Exposed to Varied Weather [] Others (Specify) []		
	Management [Other (Specify) [] []	Others (specify)		
	I CERTIFY that the ab	1	curate and complete.		
20.	I CERTIFY that the ab	ove answers are an	6 /		
	30.		46		
	Date		Signature of Employee		
21.	Describe briefly the	general function o	f the Unit or Section.		
			extension services		
22	2. Describe briefly	the general function	on of the position.		
	Instruction				
23a.	Indicate the required filling up a vacancy the qualifications of positions other than	y years and kind of education considered in (Keep the position in mind rather than abent. This item should be filled for all			
	Education: M. S. degree in the area of specialization.				
	Experience:				
23b.	Licenses or certific	ates required to de	this work, if any.		
200.					
		t the sheet answer	s are accurate and complete.		
24.	I HEREBY CERTIFY tha	t the above answer			
	(A)		Alah		
			Signature and Title of Immediate		
	Date		Supervisor		
			Supervisor /		
25.	APPROVED:		hus		
			JOSE L. BACUSMO		
	Date	-	Head of Agency		
	Da⊬e				
			,		
	100				