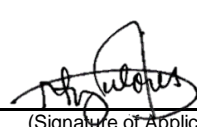




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Stamp of Date of
Receipt

APPLICATION FOR LEAVE

| | | | | | | | | | | | | | | | |
|---|----------------|--|----------------|----------------|---------------------|--|--|------------------------------|--|--|----------------|--|--|---|--|
| 1. OFFICE/DEPARTMENT | | 2. Name: (Last) (First) (Middle) | | | | | | | | | | | | | |
| | | YULORES, RITZE TWIN SANCHEZ | | | | | | | | | | | | | |
| 3. DATE OF FILING <u>9-7-2023</u> | | 4. POSITION <u>MUNICIPAL LINK / PDO-II</u> 4. SALARY <u>36,619.00</u> | | | | | | | | | | | | | |
| 6. DETAILS OF APPLICATION | | | | | | | | | | | | | | | |
| 6.A TYPE OF LEAVE TO BE AVAILABLE OF <input type="checkbox"/> Vacation Leave (Sec. 51, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Mandatory/Forced Leave (Sec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input checked="" type="checkbox"/> Sick Leave (Sec. 42, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Maternity Leave (R.A. No. 11210/IRR issued by CSC, DOLE, and SSS) <input type="checkbox"/> Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1998, as amended) <input type="checkbox"/> Special Privilege Leave (Sec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Solo Parent Leave (R.A. No. 8972 / CSC MC No. 8, s. 2004) <input type="checkbox"/> Study Leave (Sec. 68, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> 10-Day VAWC Leave (RA No. 9262 / CSC MC No. 15, s. 2005) <input type="checkbox"/> Rehabilitation Privilege (Sec. 55, Rule XVI, Omnibus Rules Implementing E.O. No. 292) <input type="checkbox"/> Special Leave Benefits for Women (RA No. 9710 / CSC MC No. 25, s. 2010) <input type="checkbox"/> Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended) <input type="checkbox"/> Adoption Leave(R.A. No. 8552) <i>Others:</i> _____ | | 6.B DETAILS OF LEAVE <i>In case of Vacation/Special Privilege Leave:</i> <input type="checkbox"/> Within the Philippines _____ <input type="checkbox"/> Abroad (Specify) _____ <i>In case of Sick Leave:</i> <input type="checkbox"/> In Hospital (Specify Illness) _____ <input checked="" type="checkbox"/> Out Patient (Specify Illness) StomachAche <i>In case of Special Leave Benefits for Women:</i> (Specify Illness) _____ <input type="checkbox"/> Completion of Master's Degree <input type="checkbox"/> BAR/Board Examination Review <i>Other purpose:</i> <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</div> INCLUSIVE DATES <div style="text-align:center">September 6, 2023</div> | | 6.D COMMUTATION <input type="checkbox"/> Not Requested <input type="checkbox"/> Not Requested <div style="text-align:right"> (Signature of Applicant)</div> | | | | | | | | | | | | | |
| 7. DETAILS OF ACTION ON APPLICATION | | | | | | | | | | | | | | | |
| 7.A CERTIFICATION OF LEAVE CREDITS As of _____ <table border="1" style="width:100%"><tr><td></td><td>Vacation Leave</td><td>Sickness Leave</td></tr><tr><td><i>Total Earned</i></td><td></td><td></td></tr><tr><td><i>Less this application</i></td><td></td><td></td></tr><tr><td><i>Balance</i></td><td></td><td></td></tr></table> <div style="text-align:center">NORHAYMA P. MAMACOTAO AO V/HRMDD-PAS HEAD</div> | | | Vacation Leave | Sickness Leave | <i>Total Earned</i> | | | <i>Less this application</i> | | | <i>Balance</i> | | | 7.B RECOMMENDATION <input type="checkbox"/> For approval <input type="checkbox"/> For disapproval due to _____ <div style="text-align:center">NAIFAH S. BALINDONG, RSW PPPP DIVISION CHIEF</div> | |
| | Vacation Leave | Sickness Leave | | | | | | | | | | | | | |
| <i>Total Earned</i> | | | | | | | | | | | | | | | |
| <i>Less this application</i> | | | | | | | | | | | | | | | |
| <i>Balance</i> | | | | | | | | | | | | | | | |
| 7.C APPROVED FOR: _____ days with pay _____ days without pay _____ others (Specify) _____ | | 7.D DISAPPROVED DUE TO: _____ _____ _____ | | | | | | | | | | | | | |
| BAILANO A. SALIK-ALI, RSW, MTSW ARD FOR ADMINISTRATION | | | | | | | | | | | | | | | |