

TOURISM INFRASTRUCTURE AND ENTERPRISE ZONE AUTHORITY

6th & 7th Floors, Tower 1
DoubleDragon Plaza
DD Meridian Park
Macapagal Avenue corner
EDSA Extension
1302 Bay Area, Pasay City

TIEZAWARKS

CSC Form 6 Revised 1998

APPLICATION FOR LEAVE

1. DEPARTMENT/DIVISION	2. ID NO.	NAME (Last)	(First)	(Middle)
Corporate Planning Dept.	2779	Bechayda	Jose Jr.	Torcuato
3. DATE OF FILING	4. POSITION		5. SA	LARY (Monthly)
14 Dec. 2020		OIC - M&E		XXXXX
DETAILS OF APPLICATION				
6. A) TYPE OF LEAVE Vacation			LEAVE WILL BE SPENT CASE OF VACATION LI	EAVE
Reason:			hin the Philippines Abroad (Specify)	+
Sick Maternity		2. IN	CASE OF SICK LEAVE In hospital (Speci	ify)
Others (Specify) Forced Leav	re		Out-Patient (Spec	cify)
From: 21	Four (4) days & 23 Dec. 202		UTATION Requested Method	Not Requested
То:	28 Dec. 2020		Signature of Appl	licant
	DETAILS	OF ACTION ON AP		
7. A) CERTIFICATION OF LEAVE Cas of Vacation Sick Days Days ABIGAIL R. PER HRMO IV, Human Resource	Total Days RCELA		MENDATION: Approval Disapproval due FRANCIS RANDY J. HO	PRTELANO
7. C) APPROVED FOR: days with pay days without pay Others (Specify)		7. D) DISAPPI	ROVED DUE TO:	.8
JOSEFINA U. SORIANO Manager, Human Resource Services Division Date: Administrative Services Department				
PLEASE SEE INSTRUCTIONS AT THE BACK				