# REPUBLIC OF THE PHILIPPINES

Tourism Infrastructure and Enterprise Zone Authority
Pasay

# APPLICATION FOR LEAVE

1. DEPARTMENT/DIVISION	2. ID NO.	NAME (Last)	(First)	(Middle)			
COPD/M&E	3060	SALON		MA. KRISTINA	E.		
3. DATE OF FILING	4. POSITION			5. SALARY (Monthly)			
December 14, 2020		PPDO A		XXXXX			
Actor Supplemental Actor Supplement		DETAILS OF AP	PLICATION				
6. A) TYPE OF LEAVE		6.B)		WILL BE SPENT : ACATION LEAVE			
Vacation		Г	Within the I				
Reason:	<del></del> _		Abroad (Sp				
Sick							
Maternity/Paternity	y	-	IN CASE OF SICE				
X Others (Specify)		L	In Hospital	(Specify)			
MC # 6	-		Out-Patient	(Specify)			
6. C) NUMBER OF WORKING	/CALENDAR D	AYS:					
APPLIED FOR:	1 (One	Day) 6. D)	COMMUTATIO				
From : December 16, 202	20		Requested	Not Req	uested		
To :XXX				~m5			
		-		Signal tre of Applicant)			
	DET	TAILS OF ACTION	ON APPLICATION	ON .			
7. A) CERTIFICATION OF LEA			RECOMMENDA				
as of				Approval			
		Ti-t-1	Ħ	Disapproval due to:			
Vacation Si	ck	Total					
D'ays Da	ays	Days		1.			
			· N	S RANDY J. HORTELA			
ABIGAIL R.	PERCELA		FRANCI	S RANDY I, HORTELA	NO		
HRM Off			1	Manager			
Human Resource S	Services Divisio	on	Corp	rate Planning Department			
7. C) APPROVED FOR:		7. D)	DISAPPROVED	DUE TO:			
days with	pay						
days with							
Others (sp							
outers (sp							
JOSEFINA U. SORIANO							
Manager, Human Resource Services Division							
Administrative Services Department							
Date : PLEASE SEE INSTRUCTIONS AT THE BACK							

# REPUBLIC OF THE PHILIPPINES

Tourism Infrastructure and Enterprise Zone Authority
Pasay

### **APPLICATION FOR LEAVE**

1. DEPARTMENT/DIVISION	2. ID NO.	NAME (Last)	(First)	(Middle)			
COPD/M&E	3060	SALON		MA, KRISTINA	Е.		
3. DATE OF FILING	4. POSITION			5. SALARY (Monthly)			
December 14, 2020		PPDO A		XXXXX			
	DETAILS OF APPLICATION						
6. A) TYPE OF LEAVE Vacation				WILL BE SPENT : ACATION LEAVE			
Reason:		<u> </u>	Within the P				
			Abroad (Spe				
Sick		rn.	I CASE UE SICE	LEAVE			
Maternity/Paternity IN CASE OF SICK LEAVE  X Others (Specify) In Hospital (Specify)							
	X Others (Specify) In Hospital (Specify)						
		AVC	Out-Patient	(Specify)			
6. C) NUMBER OF WORKING APPLIED FOR:	CALENDAR D. 1 (One		COMMUTATION	v			
From: December 17, 202			Requested		quested		
To :XXX				- nn 5			
			ſS	Signature of Applicant)			
	DET	AILS OF ACTION O	N APPLICATIO	- 0			
7. A) CERTIFICATION OF LEA		TO HILLY ASSAULT AND A STATE OF THE STATE OF	RECOMMENDA				
as of				Approval			
	ick	Total		Disapproval due to:			
Vacation Si	ick	TORRI			-		
Dave	ays	Days					
Days Days	uyo [		+	Wa land			
			0 1	THOWA			
ABIGAIL R.			FRANCI	S RANDY J. HORTEL	ANO		
HRM Off Human Resource		on.	Corne	Manager orate Planning Departmen	ıt		
	POTATOGS DIAIRIC		DISAPPROVED				
7. C) APPROVED FOR:	nav	7. DJ 1	PIOUT I NOVEL				
days with	-	_					
days with		-					
Others ( <i>sp</i>	есцу)						
	*						
JOSEFINA U. SORIANO							
Manager, Human Resource Services Division Administrative Services Department							
Date:	Date :						
PLEASE SEE INSTRUCTIONS AT THE BACK							

# REPUBLIC OF THE PHILIPPINES

 $\label{eq:continuity} \textbf{Tourism Infrastructure and Enterprise Zone Authority} \\ \textbf{Pasay}$ 

# APPLICATION FOR LEAVE

1. DEPARTMENT/DIVISION	2. ID NO.	NAME (Last)	(First)	(Middle)		
COPD/M&E	3060	SALO		MA, KRISTINA	Ε,	
3. DATE OF FILING	4. POSITION	JALC		5. SALARY (Monthly)		
December 14, 2020		PPDO A		xxxxx		
		DETAILS OF AP	PLICATION			
6. A) TYPE OF LEAVE		6. B)		WILL BE SPENT:		
X Vacation		Г	1. IN CASE OF VA			
Reason:			Within the P Abroad (Spe			
Sick		<b>L</b>				
Maternity/Paternity	7	_	IN CASE OF SICK			
Others (Specify)		L	In Hospital (	Specify)		
			Out-Patient	(Specify)		
6. C) NUMBER OF WORKING						
APPLIED FOR:	5 (Five		COMMUTATION			
From : December 21, 22, To : XXX	23, 28 & 29, 2	<u>020                                   </u>	Requested	Not Rec	quested	
10 <u>. AAA</u>				~m5		
			(S:	gnature of Applicant)		
	DET	AILS OF ACTION	ON APPLICATIO	N		
7. A) CERTIFICATION OF LEA	VE CREDITS	7. B)	RECOMMENDA'			
as of				Approval Disapproval due to:	<del></del>	
Vacation Si	ck	Total		Disappi ovai due to	<del></del>	
Days Da	vs	Days		. E		
			172	Frank		
			Ma			
ABIGAIL R.			FRANCIS	RANDY J. HORTELA	ANO	
HRM Offi Human Resource S		n	Corno	Manager rate Planning Department		
7. C) APPROVED FOR:	ei vices Divisio		DISAPPROVED	T .		
days with p	2017	7. 0)	DISKI I KOVED	BOL TO.		
	-				ł	
days witho						
Others (spe	ecify)					
JOSEFINA U. SORIANO						
Manager, Human Resource Services Division						
Administrative Services Department Date :						
PLEASE SEE INSTRUCTIONS AT THE BACK						