



**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

CSC Form 6  
Revised 1998

**APPLICATION FOR LEAVE**

1. DEPARTMENT/DIVISION	2. ID NO.	NAME (Last)	(First)	(Middle)
Corplan	0076	DIZON	ELAINE	PINEDA
3. DATE OF FILING	4. POSITION		5. SALARY (Monthly)	
December 14, 2020	Sr. Project Planning & Development Officer			

**DETAILS OF APPLICATION**

6. A) TYPE OF LEAVE		6. B) WHERE LEAVE WILL BE SPENT	
<input checked="" type="checkbox"/> Vacation	Reason: _____	1. IN CASE OF VACATION LEAVE	
<input type="checkbox"/> Sick		<input checked="" type="checkbox"/> Within the Philippines	
<input type="checkbox"/> Maternity		<input type="checkbox"/> Abroad (Specify) _____	
<input type="checkbox"/> Others (Specify) _____		2. IN CASE OF SICK LEAVE	
		_____ In hospital (Specify)	
		_____ Out-Patient (Specify) _____	
6. C) NUMBER OF WORKING/CALENDAR DAYS:		6. D) COMMUTATION	
APPLIED FOR: <u>2 days</u>		<input type="checkbox"/> Requested <input type="checkbox"/> Not Requested	
From: <u>December 23 + 28,</u>		<u>[Signature]</u>	
To: <u>2020</u>		Signature of Applicant	

**DETAILS OF ACTION ON APPLICATION**

7. A) CERTIFICATION OF LEAVE CREDITS			7. B) RECOMMENDATION:	
as of _____			<input type="checkbox"/> Approval	
			<input type="checkbox"/> Disapproval due to: _____	
Vacation	Sick	Total		
Days	Days	Days		
7. C) APPROVED FOR:			7. D) DISAPPROVED DUE TO:	
_____ days with pay			_____	
_____ days without pay			_____	
_____ Others (Specify)				

**ABIGAIL R. PERCELA**

HRMO IV, Human Resource Services Division

**FRANCIS RANDY I. HORTELANO**

Manager, Corporate Planning Dept.

Date: \_\_\_\_\_

**JOSEFINA U. SORIANO**  
Manager, Human Resource Services Division  
Administrative Services Department

**PLEASE SEE INSTRUCTIONS AT THE BACK**

**TIEZAWORKS**