

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT <u>Office of the Commissioner - Ex Officio</u>	2. NAME : (Last) (First) (Middle) <u>Company, Wattsavers Energy Services</u>													
3. DATE OF FILING: <u>2025-03-20</u>	4. POSITION: <u>Presidential Staff Officer I</u>	5. SALARY: <u>31320.00</u>												
6. DETAILS OF APPLICATION														
6.A TYPE OF LEAVE TO BE AVAILED OF <input checked="" type="checkbox"/> Vacation Leave <input type="checkbox"/> Mandatory/Forced Leave <input type="checkbox"/> Sick Leave <input type="checkbox"/> Maternity Leave <input type="checkbox"/> Paternity Leave <input type="checkbox"/> Special Privilege Leave <input type="checkbox"/> Solo Parent Leave <input type="checkbox"/> Study Leave <input type="checkbox"/> 10-Day VAWC Leave <input type="checkbox"/> Rehabilitation Privilege <input type="checkbox"/> Special Leave Benefits for Women <input type="checkbox"/> Special Emergency (Calamity) Leave <input type="checkbox"/> Adoption Leave <input type="checkbox"/> CTO Leave Others: _____	6.B DETAILS OF LEAVE <i>In case of Vacation/Special Privilege Leave:</i> <input checked="" type="checkbox"/> Within the Philippines: <u>Manila</u> <input type="checkbox"/> Abroad (Specify): _____ <i>In case of Sick Leave:</i> <input type="checkbox"/> In Hospital (Special Illness): _____ <input type="checkbox"/> Out Patient (Special Illness): _____ <i>In case of Special Leave Benefits for Women:</i> <input type="checkbox"/> (Special Illness): _____ <i>In case of Study Leave:</i> <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 <u>1 Day/s</u> INCLUSIVE DATES <u>Mar 20, 2025</u>	6.D COMMUTATION <input checked="" type="checkbox"/> 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 <u>2025-03-20</u> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th></th> <th>Vacation Leave</th> <th>Sick Leave</th> </tr> </thead> <tbody> <tr> <td><i>Total Earned</i></td> <td style="text-align: center;">0.000</td> <td style="text-align: center;">0.000</td> </tr> <tr> <td><i>Less this application</i></td> <td style="text-align: center;">1.000</td> <td style="text-align: center;">0.000</td> </tr> <tr> <td><i>Balance</i></td> <td style="text-align: center;">5.000</td> <td style="text-align: center;">5.000</td> </tr> </tbody> </table> <div style="text-align: right;">_____ (Authorized Officer)</div>		Vacation Leave	Sick Leave	<i>Total Earned</i>	0.000	0.000	<i>Less this application</i>	1.000	0.000	<i>Balance</i>	5.000	5.000	7.B RECOMMENDATION <input checked="" type="checkbox"/> For approval <input type="checkbox"/> For disapproval due to: _____ <div style="text-align: right;">_____ (Authorized Officer)</div>	
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<i>Less this application</i>	1.000	0.000												
<i>Balance</i>	5.000	5.000												
7.C APPROVED FOR: <u>1</u> days with pay <u> </u> days without pay Others (Specify): _____ <div style="text-align: right;">_____ (Authorized Official)</div>			7.D DISAPPROVED DUE TO: _____ <div style="text-align: right;">_____ (Authorized Official)</div>											