

APPLICATION FOR LEAVE

INSTITUTE OF BIOLOGY

1. OFFICE/AGENCY _____ 2. NAME (Last) _____ (First) _____ (Middle) _____
3. DATE OF FILING _____ 4. POSITION _____ 5. SALARY (Monthly) _____

6. a) TYPE OF LEAVE :
 Vacation
 to seek employment
 Others (specify) _____
 Sick
 Maternity
 Others (specify) _____

6. b) WHERE LEAVE WILL BE SPENT :
 (1) IN CASE OF VACATION LEAVE:
 Within the Philippines
 Abroad (specify) _____
 (2) IN CASE OF SICK LEAVE
 In hospital (specify) _____
 Out-Patient (specify) _____

c) NUMBER OF WORKING DAYS APPLIED FOR : _____
 INCLUSIVE DATES: _____

d) COMMUTATION :
 Requested
 Not Requested

 (Signature of Applicant)

DETAILS OF ACTION ON APPLICATION

7. a) CERTIFICATION OF LEAVE CREDITS : _____ as of _____

Vacation	Sick	Total
Days	Days	Days

 (Personnel Officer)

7. b) RECOMMENDATIONS :
 Approval
 Disapproval due to _____

 (Authorized Official)

7. c) APPROVED FOR : _____ day with pay
 _____ days without pay
 _____ others (specify) _____

7. d) DISAPPROVAL DUE TO : _____

7. e) BALANCE OF LEAVE CREDITS
 as of _____ *

*End of the month immediately preceding the date of submission to HRDO.

Vacation	Sick	Total

CERTIFIED CORRECT:

 NAME/SIGNATURE/DATE (Personnel Officer) _____ (Signature)