

APPLICATION FOR LEAVE

1. Office/ Agency _____	2. Name: (Last) _____ (First) _____ (Middle) _____
3. Date of Filing _____	4. Position _____ 5. Salary (Monthly) _____

DETAILS OF APPLICATION

6. A) TYPE OF LEAVE

- / / Vacation _____
- / / To seek Employment _____
- / / Others (Specify) _____
- _____
- / / Sick _____
- / / Maternity _____
- / / Others (Specify) _____
- _____

6. B) WHERE LEAVE WILL BE SPENT

- 1.) / / Within the Philippines _____
- Abroad (Specify) _____
- _____
- 2.) IN CASE SICK LEAVE
- / / In Hospital (Specify) _____
- _____
- / / Out Patient (Specify) _____
- _____

6. C.) NUMBER OF WORKING DAYS APPLIED FOR _____

Inclusive Date (s): _____

6. D) COMMUTATION

/ / Requested / / Not Requested

RECOMMENDING APPROVAL:

Principal

(Signature of Applicant)
Employee No: _____ Sta.: _____
Eff. Date of Perm. Appt.: _____

District Supervisor

DETAILS OF ACTION APPLICATION

7. A) CERTIFICATION OF LEAVE CREDITS

As of _____

<u>Vacation</u>	<u>Sick</u>	<u>Total</u>
_____	_____	_____

7. B) RECOMMENDATION

- / / Approval _____
- / / Disapproval due to _____
- _____

ARNOLD S. MAGDAET
Administrative Officer V

ANTHONY H. LIOBET, CESO VI
*Asst. School Division Superintendent
Officer-In-Charge*

7. C) APPROVED FOR:

_____ days with pay
_____ days without pay
_____ days others (Specify) _____

7. D) DISAPPROVED DUE TO:

Regional Director