

APPLICATION FOR LEAVE

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

DETAILS OF APPLICATION

<p>6. a) TYPE OF LEAVE</p> <p><input type="checkbox"/> Vacation <input type="checkbox"/> To seek employment <input type="checkbox"/> Others (Specify) _____</p> <p>_____</p> <p><input type="checkbox"/> Sick <input type="checkbox"/> Maternity <input type="checkbox"/> Others (specify) _____</p> <p>_____</p> <p>c) NUMBER OF WORKING DAYS APPLIED</p> <p>FOR: _____ Inclusive dates: _____</p> <p>_____</p>	<p>6. B) WHERE LEAVE WILL BE SPENT</p> <p>1. IN CASE OF VACATION LEAVE <input type="checkbox"/> Within the Philippines <input type="checkbox"/> Abroad (Specify) _____</p> <p>_____</p> <p>2. IN CASE OF SICK LEAVE <input type="checkbox"/> In hospital (Specify) _____</p> <p>_____</p> <p><input type="checkbox"/> Out-patient (Specify) _____</p> <p>_____</p> <p>d) COMMUTATION</p> <p><input type="checkbox"/> Requested <input type="checkbox"/> Not Requested</p> <p>_____</p> <p style="text-align: right;">(Signature of Applicant)</p>
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DETAILS OF ACTION ON APPLICATION

<p>7. a) CERTIFICATION OF LEAVE CREDITS as of _____</p> <table border="1" style="width: 100%; border-collapse: collapse; margin: 10px 0;"> <thead> <tr> <th style="width: 33%;">Vacation</th> <th style="width: 33%;">Sick</th> <th style="width: 33%;">Total</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"> </td> <td> </td> <td> </td> </tr> <tr> <td style="text-align: center;">Days</td> <td style="text-align: center;">Days</td> <td style="text-align: center;">Days</td> </tr> </tbody> </table> <p style="text-align: center; margin-top: 20px;">NELSON JOSE VINCENT B. QUERIJERO Director</p>	Vacation	Sick	Total				Days	Days	Days	<p>7.b) <input type="checkbox"/> Approval</p> <p><input type="checkbox"/> Disapproval due to _____</p> <p>_____</p> <p style="text-align: right;">(Authorized signature)</p>
Vacation	Sick	Total								
Days	Days	Days								

<p>c) APPROVED FOR:</p> <p>_____ days with pay _____ days without pay _____ Others</p>	<p>d) DISAPPROVED DUE TO:</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">Signature</p>
<p>DATE: _____</p>	