CS	Form	No.	34-E
Seri	es 2018	3	

For National Government Agencies/ Government-Owned or Controlled Corporations/State Universities and Colleges

(Stamp of Date of Receipt)

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VISAYAS STATE UNIVERSITY

(Name of Agency)

PLANTILLA OF CASUAL APPOINTMENTS (REAPPOINTMENT-RENEWAL)

Department/Office INSTRUCTIONS:	College of Veterina	ry Medicine	(CVM)						Source of Fi	unds: A.III.b.1	
NAME OF APPOINTEE/S			POSITION TITLE	EQUIVALENT		PERIOD OF EMPLOYMENT		ACKNOWLEDGEMENT OF APPOINTEE			
Last Name	First Name	Name Extension (Jr/III)	Middle Name		SALARY/ JOB/ PAY GRADE	DAILY WAGE	From (mm/dd/yyyy)	To (mm/dd/yyyy)		Signature	Date Received
1 BALLENTES	Vera Stephanie	N/A	Bayog	Administrative Assistant III	SG-9	853.82	7/1/2020	12/31/2020		Xellas	7/23/20
2	2 ****NOTHING FOLLOWS****									0	11.100
3									-		
4										***************************************	
5											
CERTIFICATION This is to certif	DN y that all requirements a 24, s. 2017, as amended	ınd supportii	ng papers pursuant to	APPOINTING OF	-		o an easy been com		CSC NOTA		
	LOURDES B)			EDGARDO E	-				CSC Offici	al
Date:	7/1/202	0		Date:	7/1/20:	20			Date:	300 0 11101	