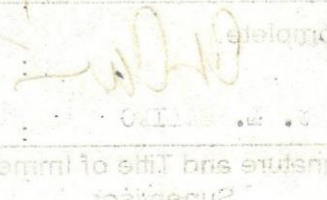


REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1 (Position Description Form)		1. NAME OF EMPLOYEE LORETO M. THERESA P. (Family Name) (Given Name) (Middle Name)	
2. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT VISAYAS STATE UNIVERSITY		3. BUREAU OR OFFICE VSU	
4. DEPT./BRANCH/DIVISION DoPAS		5. WORK STATION/PLACE OF WORK VSU	
6a. PRES. APPRO. ACT/ BOARD RES/ ORD. NO.	6b. PREV. APPRO. ACT/ BOARD RES/ ITEM NO. VISCAB-AP2-14-1998	7a. SALARY P.A. P 230,016.00	
8. OFFICIAL DESIGNATION OF POSITION Asst. Professor		7b. OTHER COMPENSATION PERA/ACA	
10. WAPCO CLASSIFICATION OF THIS POSITION Asst. Professor IV		9. WORKING PROPOSED TITLE Asst. Professor	
12. FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENTAL UNIT AND UNIT'S CLASS MUNICIPALITY [] CITY [] PROVINCE [] 1st [] 2nd [] 3rd [] 4th [] 5th [] 6th []		11. OCCUPATION GROUP TITLE (leave blank)	
13. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attach additional sheets.			
Percent of Working Time : DUTIES			
90% 1. To teach general and major chemistry courses. 5% 2. To act as thesis and student adviser to major students. 5% 3. To do other assignments assigned by the dept. head and colleagues.			
I HEREBY CERTIFY that the above answers are accurate and complete.			
Signature and Title of Immediate Supervisor 		Date 	
Head of Agency 		Date	

14. POSITION TITLE OF IMMEDIATE SUPERVISOR Head, DoPAd	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR Head, DoPAd																												
16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE (List only by their item nos. and titles) None																													
17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in performance of work. computer, QWP, LJD, glasses, etc.																													
18. CONTACT <table style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">Occasional</th> <th style="text-align: center;">Frequent</th> </tr> </thead> <tbody> <tr> <td>General Public</td> <td style="text-align: center;">[]</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Other Agencies</td> <td style="text-align: center;">[]</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Supervisors</td> <td style="text-align: center;">[]</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Management</td> <td style="text-align: center;">[]</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Others (Specify)</td> <td style="text-align: center;">[]</td> <td style="text-align: center;">[]</td> </tr> </tbody> </table>		Occasional	Frequent	General Public	[]	[]	Other Agencies	[]	[]	Supervisors	[]	[]	Management	[]	[]	Others (Specify)	[]	[]	19. WORKING CONDITION <table style="width: 100%;"> <tbody> <tr> <td>Normal Working Condition</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Field work</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Field Trips</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Exposed to Varied Weather</td> <td style="text-align: center;">[]</td> </tr> <tr> <td>Other's (Specify)</td> <td style="text-align: center;">[]</td> </tr> </tbody> </table>	Normal Working Condition	[]	Field work	[]	Field Trips	[]	Exposed to Varied Weather	[]	Other's (Specify)	[]
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20. I CERTIFY that the above answers are accurate and complete. 1/21/09 Date <i>mtplanta</i> MA. THERESA P. LORETO Signature of Employee																													
21. Describe briefly the general function of the Unit or Section. To teach general & fundamental subjects																													
22. Describe briefly the general function of the position. Instruction, Research & Extension																													
23.a Indicate the required qualifications by years and kind of education considered in filling up a vacancy for this position. (Keep the position in mind rather than the qualifications of the present incumbent. This item should be filled for all positions other than teaching). Education: Relevant masteral degree. Experience: 2 yrs. of relevant experience; 8 hrs. of relevant training.																													
23b. Licenses or certificates required to do this work, if any. none																													
24. I HEREBY CERTIFY that the above answers are accurate and complete. <i>January 21/09</i> Date <i>[Signature]</i> G. L. CALIBO Signature and Title of Immediate Supervisor																													
25. APPROVED _____ Date <i>[Signature]</i> JOSE L. BACUNO Head of Agency																													