

REPUBLIC OF THE PHILIPPINES
BC-CSC Form No. 1
(Position Description Form)

1. NAME OF EMPLOYEE

(Family Name) (Given Name) (Middle Name)

2. DEPARTMENT, CORPORATION OR AGENCY/
LOCAL GOVERNMENT
Visayas State College of Agriculture

2. BUREAU OR OFFICE

3. DEPT./BRANCH/DIVISION

5. WORK STATION//PLACE OF WORK

6a. PRES. APPROP.
ACT/
BOARD RES/
ORD. NO.
ITEM NO.

6b. PREV. APPRO.
ACT/
BOARD RES/
ORD. NO.
ITEM NO.

7a. SALARY P.A. 7b. OTHER COMPENSATION

8. OFFICIAL DESIGNATION OF POSITION

9. WORKING PROPOSED TITLE

10. WAPCO CLASSIFICATION OF THIS POSITION

11. OCCUPATION GROUP TITLE
(leave blank)

12. FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENTAL UNIT AND UNIT'S CLASS

MUNICIPALITY []

CITY []

PROVINCE []

1st 2nd 3rd 4th 5th 6th
[] [] [] [] [] []

13. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attach additional sheets.

Percent of
Working Time

D U T I E S

14. POSITION TITLE OF IMMEDIATE SUPERVISOR 15. POSITION TITLE OF NEXT HIGHER SUPERVISOR

16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE (if more than (7), list only by their item nos. and titles)

17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in performance of work.

18. CONTACT

	Occasional	Frequent
General Public		
Other Agencies		
Supervisors		
Management		
Others (Specify)		

19. WORKING CONDITION

Normal Working Condition	
Field Work	
Field Trips	
Exposed to Varied Weather	
Others (Specify)	

20. I CERTIFY that the above answers are accurate and complete.

October 2, 1995

Date

ANALYN A. MENDOZA

Signature of Employee

21. Describe briefly the general function of the Unit or Section.

22. Describe briefly the general function of the position.

23a. 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:

Experience:

23b. Licenses or certificates required to do this work, if any.

24. I HEREBY CERTIFY that the above answers are accurate and complete.

RODOLFO A. PANINGBATAN, Ph.D.

Signature and Title of Immediate Supervisor

25. APPROVED:

Date

SAMUEL S. GO

Head of Agency

Date