

CS Form No. 33-B
Revised 2018

(Stamp of Date of Receipt)

Republic of the Philippines
VISAYAS STATE UNIVERSITY
Baybay City, Leyte

Mr./Mrs./Ms.: SHEBELLE A. CUEVA

You are hereby appointed as Instructor I (SG 12, Step 1) (Veterinary Medicine)
(Position Title)

under Temporary status at the CVM
(Permanent, Temporary, etc.) (Office/Department/Unit)

with a compensation rate of TWENTY FOUR THOUSAND FOUR HUNDRED NINETY FIVE
(P 24,495.00) pesos per month.

The nature of this appointment is original vice N/A
(Original, Promotion, etc.)

, who N/A with plantilla Item No. VISCAB-INST1-36-2020 Page NOSCA dtd 3/16/2020 pp.
Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing officer/authority.

Very truly yours,


EDGARDO E. TULIN
Appointing Officer/Authority

September 21, 2020

Date of Signing

Until 7/31/2021

Accredited/Deregulated Pursuant to
CSC Resolution No. 1400350, s. 2014
dated 3/3/2014

DRY SEAL

(Stamp of Date of Release)

Certification

This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

The position was published at _____ from _____ to _____, 20____ and posted in _____ from _____ to _____, 20____ in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on _____.


LOURDES B. CANO
HRMO

Certification

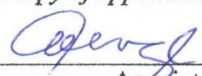
This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on _____.


BEATRIZ S. BELONIAS
Chairperson, APB

CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
☐ Validated per RAI for the month of _____			
☐ Invalidated per CSCRO/FO letter dated _____			
☐ Appeal	DATE FILED	STATUS	
☐ CSCRO/ CSC-Commission			
☐ Petition for Review			
☐ CSC-Commission			
☐ Court of Appeals			
☐ Supreme Court			

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement
Received original/photocopy of appointment on _____

Appointee