

CS Form No. 33-B
Revised 2018

Republic of the Philippines
VISAYAS STATE UNIVERSITY
Baybay City, Leyte

Mr./Mrs./Ms.: DHENBER C. LUSANTA

CIVIL SERVICE COMMISSION
WESTERN LEYTE SATELLITE OFFICE
ORMOC CITY

RECEIVED: _____
DATE/TIME

RECEIVING OFFICER: _____

for ACTION OFFICER

Date and Time Received

Date and Time Attested

ACTION OFFICER: _____

You are hereby appointed as Instructor III (SG 14, Step 1) (Horticulture)
(Position Title)

under Temporary status at the Eco-Farmi
(Permanent, Temporary, etc.) (Office/Department/Unit)


with a compensation rate of TWENTY SEVEN THOUSAND SEVEN HUNDRED FIFTY FIVE
(P27,755) pesos per month.

The nature of this appointment is original vice POLIQUIT, Angie R.
(Original, Promotion, etc.)

who, resigned with plantilla Item No. VISCAB-INST3-14-2016 Page 17 of 37 pages
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

January 2, 2020
Date of Signing

Until 12/31/2020

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

DRY SEAL

CIVIL SERVICE COMMISSION
WESTERN LEYTE SATELLITE OFFICE
ORMOC CITY

RELEASED:

DATE/TIME


RELEASING OFFICER: _____

RECEIVED BY: _____

Certification

This is to certify that all requirements and supporting papers pursuant toCSC 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 _____, 20____.


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, HRMPSB/Placement Committee

CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
<input type="checkbox"/> Validated per RAI for the month of _____			
<input type="checkbox"/> Invalidated per CSCRO/FO letter dated _____			
<input type="checkbox"/> Appeal	DATE FILED	STATUS	
<input type="checkbox"/> CSCRO/ CSC-Commission			
<input type="checkbox"/> Petition for Review			
<input type="checkbox"/> CSC-Commission			
<input type="checkbox"/> Court of Appeals			
<input type="checkbox"/> 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 Feb 14, 2026

DHENDER C. LUSANTA
Appointee