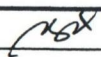


VISAYAS STATE UNIVERSITY
VSU, Baybay City, Leyte
(Name of Agency)

PLANTILLA OF CASUAL APPOINTMENT

Department/Office: VSU Hospital

Source of Funds: A. II.a

| NAME OF APPOINTEE/S | | | | POSITION TITLE (Do not abbreviate) | EQUIVALENT SALARY/ JOB/ PAY GRADE | DAILY WAGE | PERIOD OF EMPLOYMENT | | NATURE OF APPOINTMENT | ACKNOWLEDGEMENT OF APPOINTEE/S | |
|---------------------|------------|-------------------------------|-------------|---------------------------------------|---|------------|----------------------|--------------------|--------------------------|---|---------------|
| Last Name | First Name | Name Extension (Jr/III) | Middle Name | | | | From (mm/dd/yyyy) | To (mm/dd/yyyy) | | Signature | Date Received |
| 1 | FAELNAR | LADY MAY | CAPUNO | Nursing Attendant 1 | SG-4 | P 552.50 | 01/01/2018 | 06/30/2018 | Reappointment |  | 1 / 17 / 18 |
| 2 | | | | | | | | | | | |
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The abovenamed personnel are hereby hired/appointed as casuals at the rate of compensation stated opposite their names for the period indicated. It is understood that such employment will cease automatically at the end of the period stated unless renewed. Any or all of them may be laid-off any time before the expiration of the employment period when their services are no longer needed or funds are no longer available or the project has already been completed/finished or their performance are below par.

CERTIFICATION:


APPOINTING OFFICER / AUTHORITY:

ACCREDITED PURSUANT TO:

This is to certify that all the requirements and supporting documents pursuant to CSC MC No. 24, 2017 have been complied with, reviewed and found in order.


LOURDES B. CANO
Highest Ranking HRMO

Date: 1/3/2018


EDGARDO E. TULIN
(Position)

Date: 1/3/2018

CSC Resolution No.: 1400350

Date : 3/3/2014

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 | | | |