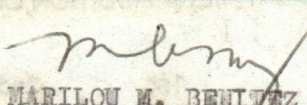




REPUBLIC OF THE PHILIPPINES		1. NAME OF EMPLOYEE
BC-CSC Form No. 1 (Position Description Form)		BRUNITEZ MARILOU MAITE (Family Name) (Given Name) (Middle Name)
2. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT LEYTE STATE UNIVERSITY		3. BUREAU OR OFFICE LSU
4. DEPT./BRANCH/DIVISION Horticulture		5. WORK STATION/PLACE OF WORK LSU
3a. PRES. APPRO. ACT/ BOARD RES/ ORD. NO. Lump sum	6b. PREV. APPRO ACT/ BOARD RES/ ITEM NO. 15	7a. SALARY P.A.: ₱174,004- 7b. OTHER COMPENSATION: PERA/ACA P2000.00/me.
3. OFFICIAL DESIGNATION OF POSITION Instructor I		9. WORKING PROPOSED TITLE Instructor I
10. WAPCO CLASSIFICATION OF THIS POSITION Instructor I		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 [ ]		
3. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attach additional sheets.		
Percent of Working Time : DUTIES		
70%	Teaching: <ul style="list-style-type: none"><li>- Teaches Hort 22 Lab. General Horticulture</li><li>- Teaches Hort 144 - Plantation Crop Products</li><li>- Teaches Hort 111 - Postharvest Physiology of Perishable Crops</li><li>- Teaches Hort 112 - Plantation Crop Production &amp; Management I</li><li>- Hort 142 - Plantation Crop Production &amp; Management II</li></ul>	
20%	Extension: <ul style="list-style-type: none"><li>- MELP - Project Leader</li><li>- Cacao and Coffee Project In-charge</li></ul>	
10%	Others:- <ul style="list-style-type: none"><li>- Member of different DOH committees</li><li>- Dept. Secretary</li><li>- Postharvest Lab. Co-incharge</li></ul>	



<b>14. POSITION TITLE OF IMMEDIATE SUPERVISOR</b>  Department Head/Assoc. Prof.		<b>15. POSITION TITLE OF NEXT HIGHER SUPERVISOR</b>  CA Dean																													
<b>16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE</b> (if more than ( 7 ) list only by their item nos. and titles)  none																															
<b>17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in performance of work.</b>  Computer, projector, calculator, chalk, board, pens, etc.																															
<b>18. CONTACT</b> <table border="0" 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;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Other Agencies</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Supervisors</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Management</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Others (Specify)</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input checked="" type="checkbox"/> students</td></tr></tbody></table>			Occasional	Frequent	General Public	<input type="checkbox"/>	<input type="checkbox"/>	Other Agencies	<input type="checkbox"/>	<input type="checkbox"/>	Supervisors	<input type="checkbox"/>	<input type="checkbox"/>	Management	<input type="checkbox"/>	<input type="checkbox"/>	Others (Specify)	<input type="checkbox"/>	<input checked="" type="checkbox"/> students	<b>19. WORKING CONDITION</b> <table border="0" style="width: 100%;"><tbody><tr><td>Normal Working Condition</td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Field work</td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Field Trips</td><td style="text-align: center;"><input type="checkbox"/></td></tr><tr><td>Exposed to Varied Weather</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr><tr><td>Other's (Specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr></tbody></table>		Normal Working Condition	<input type="checkbox"/>	Field work	<input type="checkbox"/>	Field Trips	<input type="checkbox"/>	Exposed to Varied Weather	<input checked="" type="checkbox"/>	Other's (Specify)	<input type="checkbox"/>
	Occasional	Frequent																													
General Public	<input type="checkbox"/>	<input type="checkbox"/>																													
Other Agencies	<input type="checkbox"/>	<input type="checkbox"/>																													
Supervisors	<input type="checkbox"/>	<input type="checkbox"/>																													
Management	<input type="checkbox"/>	<input type="checkbox"/>																													
Others (Specify)	<input type="checkbox"/>	<input checked="" type="checkbox"/> students																													
Normal Working Condition	<input type="checkbox"/>																														
Field work	<input type="checkbox"/>																														
Field Trips	<input type="checkbox"/>																														
Exposed to Varied Weather	<input checked="" type="checkbox"/>																														
Other's (Specify)	<input type="checkbox"/>																														
<b>20. I CERTIFY that the above answers are accurate and complete.</b>  <u>May 16, 2007</u> Date		 MARIOU M. BENITEZ Signature of Employee																													
<b>21. Describe briefly the general function of the Unit or Section.</b>  Teaching and extension work on Horticultural Crops.																															
<b>22. Describe briefly the general function of the position.</b>  Teaching, research and extension work on horticultural crops.																															
<b>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).</b>  Education: <u>BS degree in the area of specialization</u> Experience: <u>none required</u>																															
<b>23b. Licenses or certificates required to do this work, if any.</b>  none																															
<b>24. I HEREBY CERTIFY that the above answers are accurate and complete.</b>  <u>May 16, 2007</u> Date		 MARILYN M. BELARMINO Signature and Title of Immediate Supervisor																													
<b>25. APPROVED</b>  _____ Date		 PACIENCIA P. MILAN Head of Agency																													