

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.: CRISYL S. COMPENDIO

You are hereby appointed as Instructor I (SG 12, Step 2) (Elem. Education)
(Position Title)

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


with a compensation rate of TWENTY FOUR THOUSAND SEVEN HUNDRED SEVENTY NINE
(P24, 779) pesos per month.

The nature of this appointment is reappointment vice _____
(Original, Promotion, etc.)

, who N/A with plantilla Item No. VIS CAB-INST1-11-2016 Page 23 of 37 page
(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

7/30/2020
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 |
|--|------------|--------|-------------|
| <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 _____

Appointee