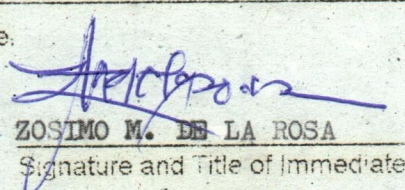
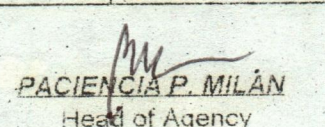


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REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1 (Position Description Form)		1. NAME OF EMPLOYEE GABUNADA FRANCISCO G. (Family Name) (Given Name) (Middle Name)	
2. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT LEYTE STATE UNIVERSITY		3. BUREAU OR OFFICE LSU	
4. DEPT./BRANCH/DIVISION FARMI		5. WORK STATION/PLACE OF WORK	
6a. PRES. APPRO. ACT/ BOARD RES/ ORD. NO.	6b. PREV. APPRO. ACT/ BOARD RES/ ITEM NO. VIS CAB-AP1-8-2001	7a. SALARY P.A.: P 159,600.00 7b. OTHER COMPENSATION: PERA/ACA	
8. OFFICIAL DESIGNATION OF POSITION Asst. Prof. 1		9. WORKING PROPOSED TITLE	
10. WAPCO CLASSIFICATION OF THIS POSITION		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 []			
13. STATEMENT OF DUTIES AND RESPONSIBILITIES. If more space is needed, please attach additional sheets.			

Percent of Working Time	DUTIES
40%	1. Teach animal science courses.
20%	2. Formulate animal-related research activities of the Institute.
30%	3. Conduct field visits to gather information/data and monitor progress of research & other activities related to animal production in the project sites.
10%	4. Do other duties that may be assigned by the Director.
100%	

14. POSITION TITLE OF IMMEDIATE SUPERVISOR Human Resource Management Officer IV Director, FARM	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR Director, ODRD																												
16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE (if more than (7) list only by their item nos. and titles)																													
17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in performance of work. Computer, calculator, motorcycle																													
18. CONTACT <table style="width: 100%; border: none;"> <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;">☐</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Other Agencies</td> <td style="text-align: center;">☐</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Supervisors</td> <td style="text-align: center;">☐</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Management</td> <td style="text-align: center;">☐</td> <td style="text-align: center;">☐</td> </tr> <tr> <td>Others (Specify)</td> <td style="text-align: center;">☐</td> <td style="text-align: center;">☐</td> </tr> </tbody> </table>		Occasional	Frequent	General Public	☐	☒	Other Agencies	☐	☒	Supervisors	☐	☒	Management	☐	☐	Others (Specify)	☐	☐	19. WORKING CONDITION <table style="width: 100%; border: none;"> <tbody> <tr> <td>Normal Working Condition</td> <td style="text-align: center;">☐</td> </tr> <tr> <td>Field work</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Field Trips</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Exposed to Varied Weather</td> <td style="text-align: center;">☒</td> </tr> <tr> <td>Other's (Specify)</td> <td style="text-align: center;">☐</td> </tr> </tbody> </table>	Normal Working Condition	☐	Field work	☒	Field Trips	☒	Exposed to Varied Weather	☒	Other's (Specify)	☐
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20. I CERTIFY that the above answers are accurate and complete. _____ Date  FRANCISCO G. GABUNADA Signature of Employee																													
21. Describe briefly the general function of the Unit or Section Research, Development & Extension activities in the fragile uplands.																													
22. Describe briefly the general function of the position. Formulate animal-related research activities of the Institute.																													
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). Education: Bachelor's degree relevant to the job. Experience: 1 year of relevant experience; 4 hours of relevant training.																													
23b. Licenses or certificates required to do this work, if any.																													
24. I HEREBY CERTIFY that the above answers are accurate and complete. April 10, 2023 Date  ZOSIMO M. DE LA ROSA Signature and Title of Immediate Supervisor																													
25. APPROVED _____ Date  PACIENCIA P. MILAN Head of Agency																													