

CS Form No. 33-B
Revised 2017

(Stamp of Date of Receipt)

Republic of the Philippines
VISAYAS STATE UNIVERSITY
Baybay City, Leyte

Mr./Mrs./Ms.: LOREGIN S. PUGOSA

You are hereby appointed as Instructor I (SG 12, Step 1)
(Position Title)

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

with a compensation rate of TWENTY ONE THOUSAND THREE HUNDRED EIGHTY SEVEN
(P 21387.00) pesos per month.

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

, who with plantilla Item No. VISCAB-INST1-40-2016 Page 28 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
EDGARDO E. TULIN

Appointing Officer/Authority

1/1/2018

Date of Signing

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

DRY SEAL


Until 07/31/16

(Stamp of Date of Release)

Certification


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

The position was published at _____ N/A _____ 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
Highest Ranking HRMO

Certification

This is to certify that the appointee has been screened and found
qualified by the majority of the HRMPSB during the deliberation held on _____.


BEATRIZ S. BELONIAS
Chairperson, HRMPSB

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