REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1 (Position Description Form)		1. NAME OF EMPLOYEE GODOY FEDERICO, JR. P. (Family Name) (Given Name) (Middle Name)
DEPARTMENT, CORPORATION OR AGENCY/LOCAL GOVERNMENT		3. BUREAU OR OFFICE Visca, Baybay, Leyte
Visa	yas State College of Agriculture	SAL AND A TRANSPORT CONTRACTOR
DEPT/BRANCH/DIVISION		5. WORK STATION/PLACE OR WORK Baybay, Leyte
Ba. PRES. APP ACT/ BOARD RE ORD. NO. ITEM NO.	ACT/	7a. SALARY XXX P40,444.30 for six months 7b. OTHER COMPENSATION:
Science Aids		9. WORKING PROPOSED TITLE
0. WAPCO CLASSIFICATION OF THIS POSITION		11. OCCUPATION GROUP TITLE (leave blank)
sheets. Percent of	The state of the s	more space is needed, please attach additional
Working Time	To set-up polycross: To set-up experiment related to breeding sweetpotatoes that are good in quality, high yield; and	
45%	To set-up experiment related	to breeding sweetpotatoes that are
	To set-up experiment related good in quality, high yield; To do other functions that ma	to breeding sweetpotatoes that are and y be assigned by his project leader
45%	To set-up experiment related good in quality, high yield; To do other functions that ma	to breeding sweetpotatoes that are

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14. POSITION TITLE OF IMMEDIATE SUPERVISOR Professor	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR Center Director
16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU item nos. and titles) 2 laborers	J DIRECTLY SUPERVISE (If more than (7), list only by their
17. MACHINES, EQUIPMENT, TOLLS, etc. used regulations weighing scale, oven, shovel,	
18. CONTRACT Occasional Frequent General Public [] [] Other Agencies [] [] Supervisors [] [] Management [] [] Others (Specify) [] []	19. WORKING CONDITION Normal Working Condition [] Field Work [] Field Trips [] Exposed to Varied Weather [] Others (Specify) []
20. I CERTIFY that the above answers are accurate and June 29-20/ Date	FEDERICO P. GODOY, JR. Signature of Employees
23a. Indicate the required qualifications by years and kir	qualifications of the present incumbent. This item should
Experience: none of the pathoonal of 55	ds ton decrease of contract relation
23b. Licenses or certificates required to do this work, if a	iny. 100 do other Lunctions to the
24. I HEREBY CERTIFY that the above answers are acc	JOSE L. BACUSHQ - Professor
Date 25. APPROVED:	Signature and Title of Immediate Supervisor PACIENCIA P. MILAN
Date	Head of Agency