CS Form No. 33-B Revised 2018

(Stamp of Date of Receipt)

Republic of the Philippines VISAYAS STATE UNIVERSITY Baybay City, Leyte

| Mr./M | rs./Ms.: <u>REYMAR C. ORIA</u> | | | | | |
|--------|--|--------------|------------------------------------|---|-----------------------|-------------------|
| | You are hereby appointed as | Instruct | tor I (SG 12, Ste | p 2) (Educati | on) | |
| | The second secon | | on Title) | | - | |
| under | Temporary | status at t | the | VIHS | | |
| | (Permanent, Temporary, etc. | c.) | (Of | ffice/Departmen | t/Unit) | |
| with a | compensation rate of TWEN | NTY SIX T | HOUSAND THR | EE HUNDRE | D THIR | TY SIX |
| | 36.00) pesos per month. | * | | | | |
| | The nature of this appointmen | | reappointment | | vice | N/A |
| who | N/A with pl | | (Original, Promotion No. VISCAB-IN | , , | Page | 31 of 38 pages |
| Tra | ansferred, Retired, etc.) | | | | | |
| | This appointment shall take effe | ect on the d | | uly yours, | difficer/ | aumorny. |
| | | | | EDGAR Appointing | | TULINg./Authority |
| | | | | NAME AND ADDRESS OF THE OWNER, WHEN PERSON ADDRESS OF THE OWNER, WHEN PERSON AND ADDRESS OF THE OWNER, WHEN | 8/1/2021 e of Sign | ing |
| | credited/Deregulated Pursuant t C Resolution No. <u>1801514</u> , s. 201 | | | 1 | Until 7/31 | 1/2022 |

DRY SEAL

dated 12/18/2018

(Stamp of Date of Release)

| Cert | tification | | , | | | | | |
|---|----------------------|-----------------------------------|--------------------|--|--|--|--|--|
| This is to certify that all requirements and supp | porting papers pursu | ant to CSC MC N | o. 24, s. 2017 | | | | | |
| as amended, have been complied with, reviewed a | and found to be in o | rder. | | | | | | |
| | ic althory | | | | | | | |
| The position was published atN/ | | | | | | | | |
| 20 and posted in | | | | | | | | |
| in consonance with RA No. 7041. The as | | man Resource Me | erit Promotion and | | | | | |
| Selection Board (HRMPSB) started on | , 20 | | | | | | | |
| | HONEY | Konsi SOFIA V. COLI IC HRMO | IS | | | | | |
| | | | | | | | | |
| 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 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | /ly/. | | | | | | |
| | | IZ S. BELONIAS HRMPSB/ Place | ment Committee | | | | | |
| | enan person, | Thavir SB/ Times | | | | | | |
| | | | | | | | | |
| CSC/HR | MO Notation | | | | | | | |
| ACTION ON APPOIN | Recorded by | | | | | | | |
| ☐ Validated per RAI for the month of | | | | | | | | |
| ☐ Invalidated per CSCRO/FO letter dated | | | | | | | | |
| □ Appeal | DATE FILED | STATUS | | | | | | |
| TICSCRO/CSC-Commission | 2.47 78 1 | | | | | | | |

| ACTION ON APPOINTMENTS | | | | | |
|--------------------------------------|--|-----|--|--|--|
| ☐ Validated per RAI for the month of | | | | | |
| | | | | | |
| □CSCRO/ CSC-Commission | | 34. | | | |
| ☐ Petition for Review | | | | | |
| □CSC-Commission | | | | | |
| □Court of Appeals | | - | | | |
| □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 11/24/2

REYMANDO OR Appointee