| REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1 (POSITION DESCRIPTION FORM) 2. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT LEYTE STATE UNIVERSITY | | | 1. | 1. NAME OF EMPLOYEE GALAMBAO MARCIANA BAJA (Family Name) (Given Name) (Middle Name) 3. BUREAU OR OFFICE National Abaca Research Center | | | | | |
|--|---|--------------|-------------------------------|---|---------|-------------|---------|-------------|-------|
| | | | 3. | | | | | | |
| 4. DEPT./BRANCH/DIVISION | | | 5. WORK STATION/PLACE OF WORK | | | | | | |
| | | | | LSU | , Bayba | y, Leyte | | | |
| 6a. PRES. APPROP. 6b. ACT/ BOARD RES/ | PREV. APPRO ACT/ BOARD RES/ | P. | 7: | a. SALARY | P.A. | 4. 45 C | | | |
| | ORRD. NO. ITEM NO. | | 7 | o. OTHER | COMP | ENSATION | V . | | |
| 8. OFFICIAL DESIGNATION OF POSITION | | | 9 | WORKING PROPOSED TITLE | | | | | |
| Science Research Assistant | | | | Science Research Assistant | | | | | |
| 10. WAPCO CLASSIFICATION OF THIS POSITION | | | | 11. OCCUPATION GROUP TITLE (Leave Blank) | | | | | |
| 12. FOR LOCAL GOVERN MUNICIPA | MENT POSITIO | | | | | | | [] | |
| 1st [] | 2nd [] | 3rd [] | | h [] | 5th | [] | 6th | [] | |
| 13. STATEMENT OF DUTI | ES AND RESPO | ONSIBILITIES | S. If more | space is ne | eded, p | olease atta | ch addi | tional shee | ets. |
| Percent of DU Working Time | TIES: | | | | | | | | |
| | | | | | | | | | |
| 30% -To assist | in the optimiza | ation of the | Temporar | y Immersi | on Sys | tem (TIS) | | | |
| | in the in vitro is and semi soli | | gation of | disease-fr | ee higl | n yielding | abaca | varieties | using |
| 20% -To collec | 20% -To collect, gather and analyze data and prepare research reports | | | | | | | | |
| 10% To perfor | 10% -To perform other related activities that may be assigned by the immediate supervisor | | | | | | | | |

| 14. P | OSITION TITLE OF IMMEDIATE SUPERVISOR Professor/Director NARC | 15. POSITION TITLE OF NEXT HIGHER SUPERVISOR Professor/Director REPO | | | | | |
|---------|---|---|--|--|--|--|--|
| 16. | NAMES, TITLES AND ITEM NOS. OF THOSE YOU nos. and titles). | IRECTLY SUPERVISE (if more than (7), list only by their iter | | | | | |
| 17. M | IACHINES, EQUIPMENT, TOOLS, etc. used regularly | in performance of work. | | | | | |
| 18. C | ONTACT | 19. WORKING CONDITION | | | | | |
| | General Public Other agencies Supervisors Management Others (specify) Occasional Frequent x x x x x x And Others | Normal Working Conditionx Field Workx Field Tripsx Exposed to varied weatherx Other (specify) travels | | | | | |
| 20.10 | CERTIFY that the above answers are accurate and co | omplete. | | | | | |
| | 20, 2004 Date | MARCIANA B GALAMBAO Signature of employee | | | | | |
| 21. D | escribe briefly the general function of the Unit or Sect | ion | | | | | |
| | to conduct research and extension services on all a | aspects of abaca | | | | | |
| 22. D | escribe briefly the general function of the position | | | | | | |
| | to do research work. | | | | | | |
| 23a. | 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 qualification of the present incumbent. This item should be filled for positions other than teaching). Education: Bachelor's degree in the area of specialization Experiences: not required | | | | | | |
| 23b. L | Licenses or certificates required to do this work, if any | | | | | | |
| | BS in Agriculture | | | | | | |
| 24. 1 1 | hereby certify that the above answers are accurate an | LELITA R. GONZAL | | | | | |
| | Si | Director, NARC \ gnature and Title of Immediate Supervisor | | | | | |
| 25. A | PPROVED: | Min | | | | | |
| | Date | PACIENCIA P. MILAN President Head of Agency | | | | | |