REPU	BLIC OF THE	PHILIPPINES	See See See	1 NAME OF	EMPLOYER			
BC-CSC Form No. 1				1. NAME OF EMPLOYEE				
(Position Description Form)			The state of	(Family Name) (Given Name) (Middle Name)				
2. DEPARTMENT, CORPORATION OR AGENCY/				3. BUREAU OR OFFICE				
LOCAL GOVERNMENT								
LEYTE STATE UNIVERSITY			SECTIVE	V TO BE THE LSU BHT TO POM METI ON PERSON SERVE				
4. DEPT./BRANCH/DIVISION				5. WORK STATION/PLACE OF WORK				
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3. OFFICIAL DESIGNATION OF POSITION				9. WORKING PROPOSED TITLE				
Assistant Professor III							near	
10. WAPCO CLASSIFICATION OF THIS POSITION				11. OCCUPATION GROUP TITLE				
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12. FOR LOCAL GOVE	MENT POSIT	ION, CHECK GOVERN			ITS CLASS	1 1 1 m . Th.		
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14. F	POSITION TITLE OF IMMEDIATE SUPERVISOR	15. POSITION TITLE OF NEXT HIGHER				
	Department Readn Science Education	SUPERVISOR Dean, College of Education				
	NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECT	Wall Wall Wall Wall Wall Wall Wall Wall				
17. 1	MACHINES, EQUIPMENT, TOOLS, etc. used regularly in I	performance of work.				
	CONTACT Occasional Frequent General Public [] [] Other Agencies [] [] Supervisors [] [] Management [] [] Others (Specify) [] []	19. WORKING CONDITION Normal Working Condition Field work Field Trips Exposed to Varied Weather Other's (Specify) []				
20.	I CERTIFY that the anove answers are accurate and comple	c vie				
A.	Describe briefly the general function of the Unit or Section. Teaching/Instruction	Signature of Employee				
2.	Describe briefly the general function of the position.	2 - 11(f) Smi 28				
	Post whing	TO THE PERSON OF CLASSIC COUNTY OF THE				
S.a	Indicate the required qualifications by years and kind of ed vacancy for this position. (Keep the position in mind rather incumbent. This item should be filled for all positions other Education:	than the qualifications of the present				
З b .	Licenses or certificates required to do this work, if any.					
4.	I HEREBY CERTIFY that the above answers are accurate a	and complete.				
4.	I HEREBY CERTIFY that the above answers are accurate a	LiCente				
4.		LiCilla Delegas L. Alcesus Signature and Title of Immediate				
5.	Sine Wisers A Brage ment Office of the state of the stat	LiGenha_ Deleras L. Alceber				