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14.	POSITION TITLE OF IMMEDIATE SUPERVISOR   1	5. POSITION TITLE OF NEXT HIGHER SUPERVISOR	
		72. 4 . 6 7 . 4 . 4	
16.	NAMES. TITLES AND ITEM NOS. OF THOSE YOU I	Director of Instruction	
10.	only by their item r		
	dilly by their Item i	ios. and titles)	
	None	The second of the second of the second of	
17.	MACHINES, EQUIPMENT, TOOLS, etc. used requ	larly in performance of work.	
		estimation in the first section of	
	Audio-visual equipment,	etc.	
18.	CONTACT JON TO JOHN HE WOUTH AND VIOLENCE	19. WORKING CONDITION	
The state of	Occasional Frequent	Normal Working Condition	
	General Public	Field Work	
	Other Agencies Supervisors	Field Trips	
	Management	Exposed to Varied Weather Others (Specify)	
	Others (Specify)	others (specify)	
	others topecarry,		
20.	I CERTIFY that the above answers are accur	ate and complete.	
	1 / b mod	Royacan vos	
	Byt. 12, 1992	Marie a service of the country designed and the country of the cou	
31	Date Date	Signature of Employee	
)1.	Describe briefly the general function of t	the unit or Section.	
		the first of the second of the	
	To provide instruction, resear	ch % extension services.	
	A Committee of the Comm	The state of the s	
22.	Describe briefly the general function of t	he position.	
	one draw	ing the second second second second second	
	To provide instruction in Holticulture subjects.		
27-	Table 1 Land and a Lay Co. same at the	THE STREET OF SHEET PROPERTY OF THE STREET	
23a.			
	filling up a vacancy for this position. (Keep the position in mind rather than the qualifications of the present incumbent. This item should be filled for all posi-		
	tions other than teaching).	This item should be lilled for all post	
	Education: MS degree with specific area of specialization plus other		
	requirements per QS of the College.		
	Experience:	o of the correge.	
23b.	Licenses or certificates required to do t	this work, if any.	
1.			
24	None		
24.	I HEREBY CERTIFY that the above answers ar	re accurate and complete.	
		Me	
		ANGELA S. ALMENDRAS - Head, DASS	
	Date	Signature and Title of Immeddiate Supervisor	
25.	APPROVED:	July 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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		Brailles	
		SAMUEL S. CO.	
	Date	Hoad of Agency	