

CS Form No. 33-B
Revised 2018

(Stamp of Date of Receipt)

Republic of the Philippines
VISAYAS STATE UNIVERSITY
Baybay City, Leyte

Mr./Mrs./Ms.: GINA A. DELIMA

You are hereby appointed as Instructor II (SG 13, Step 1) (Sustainable Dev't)
(Position Title)

under Temporary status at the ISRDS
(Permanent, Temporary, etc.) (Office/Department/Unit)


with a compensation rate of TWENTY FIVE THOUSAND TWO HUNDRED THIRTY TWO
(P25,232.00) pesos per month.

The nature of this appointment is original vice _____
(Original, Promotion, etc.)

who, _____ with plantilla Item No. VISCAB- LS Page _____ pages
(Transferred, Retired, etc.)

This appointment shall take effect on the date of signing by the appointing officer/authority.

Very truly yours,


EDGARDO E. TULIN
Appointing Officer/Authority

January 9, 2020
Date of Signing

Until 12/31/2020

Accredited/Deregulated Pursuant to
CSC Resolution No. 1400350, s. 2014
dated 3/3/2014



(Stamp of Date of Release)

Certification


This is to certify that all requirements and supporting papers pursuant to **CSC MC No. 24, s. 2017, as amended**, have been complied with, reviewed and found to be in order.

The position was published at _____ from _____ to _____,
20____ and posted in _____ from _____ to _____,
20____ in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on _____.


LOURDES B. CANO
HRMO

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 _____.


BEATRIZ S. BELONIAS
Chairperson, APB

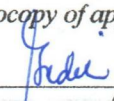
CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
<input type="checkbox"/> Validated per RAI for the month of _____			
<input type="checkbox"/> Invalidated per CSCRO/FO letter dated _____			
<input type="checkbox"/> Appeal	DATE FILED	STATUS	
<input type="checkbox"/> CSCRO/ CSC-Commission			
<input type="checkbox"/> Petition for Review			
<input type="checkbox"/> CSC-Commission			
<input type="checkbox"/> Court of Appeals			
<input type="checkbox"/> 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 _____


Appointee