

REPUBLIC OF THE PHILIPPINES

BC-CSC Form No. 1

(Position Description Form)

2. DEPARTMENT, CORPORATION OR AGENCY/
LOCAL GOVERNMENT

LEYTE STATE UNIVERSITY

4. DEPT./BRANCH/DIVISION

Institute of Human Kinetics

6a. PRES. APPRO.

ACT/

BOARD RES/

ORD. NO.

6b. PREV. APPRO

ACT/

BOARD RES/

ITEM NO. **LS**

1. NAME OF EMPLOYEE

SAPAN

MARY JEAN

M.

(Family Name) (Given Name) (Middle Name)

3. BUREAU OR OFFICE

LSU

5. WORK STATION/PLACE OF WORK

LSU

7a. SALARY P.A.: ₱ 162, 144.

7b. OTHER COMPENSATION: **PERA/ACA**

8. OFFICIAL DESIGNATION OF POSITION

Instructor I

9. WORKING PROPOSED TITLE

Instructor-I

10. WAPCO CLASSIFICATION OF THIS POSITION

11. OCCUPATION GROUP TITLE

(leave blank)

12. FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENTAL UNIT AND UNIT'S CLASS

MUNICIPALITY []

CITY [X]

PROVINCE []

1st

[]

2nd

[]

3rd

[]

4th

[]

5th

[]

6th

[]

13. STATEMENT OF DUTIES AND RESPONSIBILITIES If more space is needed please

attach additional sheets.

Percent of

Working Time:

DUTIES

80% 1. Teaches Service PE 11, 12, 13 & 14 & diploma in Physical Education courses (MAPEH)

10% 2. IHK Anniversary Coordinator

10% 3. Other tasks that maybe assigned by immediate superior.

100%

14. POSITION TITLE OF IMMEDIATE SUPERVISOR

Institute Director

15. POSITION TITLE OF NEXT HIGHER SUPERVISOR

College Dean

16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTLY SUPERVISE (if more than (7) list only by their item nos. and titles) none

17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in performance of work.

athletic equipment

18. CONTACT

Occasional Frequent

General Public	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other Agencies	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supervisors	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Management	<input type="checkbox"/>	<input type="checkbox"/>
Others (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

19. WORKING CONDITION

Normal Working Condition	<input checked="" type="checkbox"/>
Field work	<input type="checkbox"/>
Field Trips	<input type="checkbox"/>
Exposed to Varied Weather	<input type="checkbox"/>
Other's (Specify)	<input type="checkbox"/>

20. I CERTIFY that the above answers are accurate and complete.

Date

Signature of Employee

21. Describe briefly the general function of the Unit or Section.

To provide instruction in Service Physical Education and Diploma in Physical Education courses.

22. Describe briefly the general function of the position.

To provide instruction in Physical Education courses.

23.a. 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 qualifications of the present incumbent. This item should be filled for all positions other than teaching).

Education: BS degree in the area of specialization

Experience: none required

23b. Licenses or certificates required to do this work, if any.

24. I HEREBY CERTIFY that the above answers are accurate and complete.

Date

ALEJI A. VILLOCINO

Signature and Title of Immediate Supervisor

25. APPROVED

Date

JOSE L. BACUSNO
Head of Agency