CS Form No. 34-B Revised 2018 For Accredited/Deregulated
National Government Agencies/ Government-Owned or
Controlled Corporations/ State Universities and Colleges

(Stamp of Date of Receipt)

Republic of the Philippines

VISAYAS STATE UNIVERSITY

(Name of Agency)

PLANTILLA OF CASUAL APPOINTMENTS

Department/Office:	COLLEGE (OF FORESTRY 8	ENVIRONMENTAL	SCIENCE	(CFES)
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INSTRUCTIONS:

- (1) Only a maximum of fifteen (15) appointees must be listed on each page of the Plantilla of Casual Appointments.
- (2) Indicate 'NOTHING FOLLOWS' on the row following the name of the last appointee on the last page of the Plantilla.
- (3) Provide proper pagination (Page n of n page/s)."

NAME OF APPOINTEE/S				EQUIVALENT		PERIOD OF EMPLOYMENT		NATURE OF APPOINTMENT	ACKNOWLEDGEMENT OF APPOINTEE/S			
Last Na	ame F	First Name	Name Extensi on (Jr/III)	Middle Name	POSITION TITLE (Do not abbreviate)	SALARY/ JOB/ PAY GRADE		From (mm/dd/yyyy)	To (mm/dd/yyyy)	(Original/ Reappointment/ Reemployment)	Signature	Date Received
1 GLORIA	REY	NALDO		NERI	Forest Ranger	SG-4	600.64	7/1/2019	12/31/2019	Reappointment	Oldinas	7-19-2019
X-X-X-X-X-X	X-X										of	

The abovenamed personnel are hereby hired/appointed as casuals at the rate of compensation stated opposite their names for the period indicated. It is understood that such employment will cease automatically at the end of the period stated unless renewed. Any or all of them may be laid-off any time before the expiration of the employment period when their services are no longer needed or funds are no longer available or the project has already been completed/finished or their performance are below par.

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

LOURDES B. CANO HRMO

ate: 7/1/2019

APPOINTING OFFICER / AUTHORITY:

ACCREDITED PURSUANT TO:

CSC Resolution No.: 1400350 , s. 2014

Date : 3/3/2014

Source of Funds A. III. B.1

Date: 7/1/2019

EDGARDO E. TULIN

CSC/HRMO NOTATION **ACTION ON APPOINTMENTS** Recorded by Validated per RAI for the month of _____ Invalidated per CSCRO/FO letter dated _____ DATE FILED **STATUS** Appeal ☐ CSCRO/ CSC-Commission Petition for Review ☐ CSC-Commission □ Court of Appeals □ Supreme Court