FOR ACCREDITED/Delegulated					
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:	Budget								Source of Funds:	A.1.a	
(1)	PRUCTIONS: Only a maximum of fifteer Indicate NOTHING FOL Provide proper pagination	n (15) appointees must be l LOWS' on the row following n (Page n of n page/s)."	listed on each page g the name of the la	e of the Plantilla of 0 ast appointee on the	Casual Appointments. e last page of the Plantilla.					-		
NAME OF APPOINTEE/S			POSITION TITLE	EQUIVALENT		PERIOD OF EMPLOYMENT		NATURE OF APPOINTMENT	ACKNOWLEDGEMENT OF APPOINTEE/S			
	Last Name	First Name	Name Extension (Jr/III)	Middle Name	(Do not abbreviate)	SALARY/ JOB/ PAY GRADE	DAILY WAGE	From (mm/dd/yyyy)	To (mm/dd/yyyy)	(Original/ Reappointment/ Reemployment)	Signature	Date Received
1	Geraldo	Mona Nena	N/A	Bestudio	Administrative Aide III	SG-3	591.77	8/17/2020	12/31/2020	Original	g.	8/17/2020
2	***	NOTHING FOLLOWS****										
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	1											
The a	abovenamed personnel are hereb byment period when their services	by hired/appointed as casuals at the s are no longer needed or funds are	e rate of compensation s e no longer available or t	lated opposite their name	es for the period indicated. It is understood een completed/finished or their performan	d that such employment will ce are below par.	I cease automatically	at the end of the pe	riod stated unless re	newed. Any or all of them may be	laid-off any time before the	expiration of the

CERTIFICATION:	APPOINTING OFFICER / AUTHORITY:	ACCREDITED PURSUANT TO:
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.		CSC Resolution No.: 1400350, s. 2014
LOURDES B. CANO	EDGARDO E. TULIN . President	Date :3/3/2014
Date: 8/17/2020	Date: 8/17/2020	

Page 1 of 2

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