*For Accredited/Deregulated Agencies*

***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.: BERT C. PEÑALOSA**

**You are hereby appointed as** **Instructor I (SG 12, Step 2) (Public Administration)**
**(Position Title)**

**under** **Permanent** **(Permanent, Temporary, etc.)** **status at the** **Dept. of Business Management** **(Office/Department/Unit)**

**with a compensation rate of TWENTY SEVEN THOUSAND EIGHT HUNDRED NINETY-TWO (P 27, 892.00) pesos per month.**

**The nature of this appointment is** **reappointment** **(Original, Promotion, etc.)** **vice** **N/A**

**, who** **NA** **Transferred, Retired, etc.)** **with plantilla Item No. VISCAB-INST1-18-2016** **Page** **23 of 38** **pages**

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

**Very truly yours,**

**EDGARDO E. TULIN**
**Appointing Officer/Authority**

**June 3, 2022**
**Date of Signing**

**Accredited/Deregulated Pursuant to**
**CSC Resolution No. 1801514, s. 2018**
**dated 12/18/2018**

*DRY SEAL*

SUBJECT TO SIX (6) MONTHS PROBATIONARY PERIOD
per 2018 approved VSU MSP

## 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 N/A 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 _____, 20_____.

**HONEY SOFIA V. COLIS**
OIC 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, HRMPSB/ **Placement Committee**

## CSC/HRMO Notation

| **ACTION ON APPOINTMENTS** | | | **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 | | | |

Original Copy - for the Appointee
Original Copy- for the Civil Service Commission
Original Copy- for the Agency

**Acknowledgement**

*Received original/photocopy of appointment on* 3/7/2022

BERT C. PENALOSA
Appointee