

CS Form No. 33-B  
Revised 2018

Republic of the Philippines  
VISAYAS STATE UNIVERSITY  
Baybay City, Leyte

Mr./Mrs./Ms.: FEDERICO P. GODOY, JR.

CIVIL SERVICE COMMISSION  
WESTERN LEYTE SATELLITE OFFICE  
ORMOC CITY

RECEIVED: \_\_\_\_\_  
DATE/TIME

RECEIVING OFFICER: \_\_\_\_\_

for ACTION OFFICER

\_\_\_\_\_  
Date and Time Received

\_\_\_\_\_  
Date and Time Attested

ACTION OFFICER: \_\_\_\_\_

You are hereby appointed as Science Aide (SG 4, Step 1)  
(Position Title)

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


with a compensation rate of THIRTEEN THOUSAND EIGHT HUNDRED SEVEN PESOS  
(P 13,807.00) pesos per month.

The nature of this appointment is Reappointment vice \_\_\_\_\_  
(Original, Promotion, etc.)

who NA with plantilla Item No. \_\_\_\_\_ LS \_\_\_\_\_ Page \_\_\_\_\_ of \_\_\_\_\_ pp.  
(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

7/1/2020  
Date of Signing

Until 12/31/2020

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

DRY SEAL

CIVIL SERVICE COMMISSION  
WESTERN LEYTE SATELLITE OFFICE  
ORMOC CITY  
RELEASED:

\_\_\_\_\_  
DATE/TIME

RELEASING OFFICER: \_\_\_\_\_


RECEIVED BY: \_\_\_\_\_



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 NA from to 20 and posted in NA from to 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 .

  
**REMBERTO A. PATINDOL**  
Chairperson, HRMPSB/ **Placement Committee**


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 7-8-20

  
Appointee