REPUBLIC OF THE PHILIPPINES BC-CSC Form No. 1 (Position Description Form)	1. NAME OF EMPLOYEE ESPINA DIN AH MANI WANG (Family Name) (Given Name) (Middle Name)
2. DEPARTMENT, CORPORATION OR AGENCY/ LOCAL GOVERNMENT LEYTE STATE UNIVERSITY	3. BURÉAU OR OFFICE
4. DEPT/BRANCH/DIVISION Dept. of Animal Science - College of Agri. (DAS-CA)	5. WORK STATION/PLACE OF WORK LSU
6b. PREV. APPRO ACT/ BOARD RES/ ORD. NO. 6b. PREV. APPRO ACT/ BOARD RES/ ITEM NO. VISCAB-AP1-1-1	73. SALARY P.A.: 7b. OTHER COMPENSATION: FERNACA
8. OFFICIAL DESIGNATION OF POSITION Assistant Professor 1	9. WORKING PROPOSED TITLE
10. WAPCO CLASSIFICATION OF THIS POSITION Assistant Professor 1	11. OCCUPATION GROUP TITLE (leave blank)
12. FOR LOCAL GOVERNMENT POSITION, CHECK GOVERNMENTAL I MUNICIPALITY []. CITY [
1st 2nd 3rd	4th 5th 6th
 STATEMENT OF DUTIES AND RESPONSIBILITIES If more space attach additional sheets. 	is needed please
Percent of : DUTIES DUTIES	Provide Anstruction, reserrohy Xie. 3

(ON PH.D. STUDY LEAVE - Los Banos, Laguna - UP)

14. POSITION TITLE OF IMMEDIATE SUPERVISOR	15. POSITION TITLE OF NEXT HIGHER SUPERVISOR
Department Head	Dean of the College of Agriculture, LSU
16. NAMES, TITLES AND ITEM NOS. OF THOSE YOU DIRECTL only by their item nos. and titles)	Y SUPERVISE (if more than (7) list
17. MACHINES, EQUIPMENT, TOOLS, etc. used regularly in portion of the computer projector; c	
Occasional Frequent Occasi	19. WORKING CONDITION Normal Working Condition (x) Field work [*] Field Trips [*] Exposed to Varied Weather Other's (Specify) [*]
23. I CERTIFY that the above answers are accurate and completed and complete and co	din Aga. espina
Date	Signature of Employee
Provide instruction in animal science course	es, production, and extension services.
23.a Indicate the required qualifications by years and kind of education of this position. (Keep the position in mind rather incumbent. This item should be filled for all positions other Education: Education: Experience: 1 year of relevant experience: 4	than the qualifications of the present than teaching). tien
23b. Licenses or certificates required to do this work, if any.	
24. I HEREBY CERTIFY that the above answers are accurate a	OSCAR B. POSAS Head, DAS and Dean, CA, LSU
Date	Signature and Title of Immediate Supervisor
25 APPROVED	PACIENCIA P. MILAN
Date	Head of Agency