

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.: RUEL B. CALIPAYAN

You are hereby appointed as Driver II (SG 4, Step 1)  
(Position Title)

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

with a compensation rate of SIXTEEN THOUSAND TWO HUNDRED NINE (P 16, 209.00) pesos  
per month.

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

who N/A 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,

  
PROSE IVY G. YEPES  
Appointing Officer/Authority

November 04, 2024  
Date of Signing

Until 06/30/2025

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

DRY SEAL

(Stamp of Date of Release)

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 CSC-Bulletin of Vacant Positions from N/A to , and posted in Admin. Bldg, USSO Bulletin Boards, jobs.vsu.edu.ph from to , in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on Oct. 17, 2024 .

HONEY SOFIA V. COLIS  
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 Oct. 17, 2024 .

ELWIN JAY V. YU  
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 28-2024 NV  
Appointee