

APPLICATION FOR LEAVE

1. OFFICE/AGENCY	2. NAME (Last)	(First)	(Middle)
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3. DATE OF FILING 4. POSITION _____ 5. SALARY _____
SALARY GRADE _____

6. (a) TYPE OF LEAVE : **TERMINAL LEAVE BENEFITS**

MODE OF SEPARATION FROM THE UNIVERSITY:

- Compulsory Retirement under R.A. _____
 OPTION 1: _____ OPTION 2: _____
- Optional Retirement under R.A. _____
 OPTION 1: _____ OPTION 2: _____
- Others: (please specify)

___ Resignation ___ End of Appointment ___ Survivorship Benefit/Deceased

6. (b) Where leave will be spent:

- 1) In case of vacation leave
 within the Philippines abroad (specify)
- 2) In case of sick leave
 in-hospital out-patient
- 3) Commutation: Requested Not Requested

EFFECTIVITY DATE OF SEPARATION:

(Signature of Employee)

DETAILS OF ACTION ON APPLICATION

7. a) **CERTIFICATION OF LEAVE CREDITS :**

as of _____

Vacation	Sick	Total
Days	Days	Days

7. b) **RECOMMENDING**

- approval of Terminal Leave Benefit
- disapproval of Terminal Leave Benefit

(Personnel Officer)

HEAD OF COLLEGE / UNIT

Last Day of Actual Service: _____

7. c) **APPROVED FOR PAYMENT OF TERMINAL LEAVE BENEFIT**

7. c) **DISAPPROVAL DUE TO:** _____



TOTAL VACATION LEAVE AND SICK LEAVE CREDITS EARNED
(net of mandatory or used leaves)

TERMINAL LEAVE effective _____