Republic of the Philippines
NORTHERN BUKIDNON STATE COLLEGE
Kihare, Manolo Fortich, Bukidnon

LEAVE APPLICATION FORM
(JOB-ORDER PERSONNEL)

Instructions:
Please complete this form and submit to the HRMO, subject to the following conditions:

- **All vacation leave application should be filed 3 days in advance to the HRMO duly**
- **Approve by the Head of Office/Supervisor;**
- **Sick leave applications should be filed immediately upon return to work**
- **All leave applications are deemed to be without pay.**
- **Attached a copy this form upon submission of your DTR.**

PERSONNEL INFORMATION	
NAME:	
DATE OF FILING:	
DEPARTMENT/OFFICE:	

TYPE OF LEAVE APPLIED FOR: (*PLEASE CHECK*)

		INCLUSIVE DATES	**NO. OF DAYS APPLIED FOR**
VACATION			
SICK			
BEREAVEMENT			
PERSONAL			
FAMILY/MEDICAL LEAVE			
OTHERS: (PLEASE SPECIFY)			

SUPERVISOR'S APPROVAL:

SIGNATURE OF THE APPLICANT

☐ **APPROVED**
☐ **DISAPPROVED**

UNIT/DEPARTMENT HEAD

MM/DD/YYYY DATE SIGNED

NOTED BY:

MARY GRACE O. BUIZA, MS.
HRMO III

TO BE FILLED BY HRMO

CONTROL NO: _____
DATE FILED: _____
PERSONNEL OFFICER: _____

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SUPERVISOR'S APPROVAL:
SIGNATURE OF THE APPLICANT
APPROVED
DISAPPROVED
UNIT/DEPARTMENT HEAD
MM/DD/YYYY DATE SIGNED
NOTED BY:
MARY GRACE O. BUIZA, MS.
HRMO III
TO BE FILLED BY HRMO
CONTROL NO:
DATE FILED:
PERSONNEL OFFICER:
Doc. Code: HRMO-Form-03B Revision No. 2 Revision Date: September 15, 2022
(Please Accomplish in 3 Copies)