



Republic of the Philippines  
**Department of Education**  
 REGION VIII - EASTERN VISAYAS

January 16, 2025

**OFFICE MEMORANDUM**

AD-2025- **043**

**UPDATED DOCUMENTARY REQUIREMENTS FOR HUMAN RESOURCE-RELATED TRANSACTIONS**

To: Director III  
 Functional Division Chiefs  
 Regular and Detailed Employees  
 All Others Concerned

1. To facilitate efficient and prompt processing of HR-related transactions, all employees are required to strictly adhere to the following documentary requirements when submitting to the Administrative Division-Personnel Section:

| Process  | Requirement   | No. of Copy | Timeline of Submission   |
|--|---|-------------|--|
| <b>Application for Leave</b>   |   |             |  |
| <i>Mandatory/ Forced/ Vacation Leave</i>                             |   |             |  |
|  | Duly Filled-out Application for Leave (CS Form No. 6, Revised 2020) | One         | At least five days before going on leave                                 |
| <i>Sick Leave</i>  |   |             |  |
|  | Duly Filled-out Application for Leave (CS Form No. 6, Revised 2020) | One         | Immediately upon employee's return and up to six days from date of leave |
|  | Medical Certificate (if leave is more than 5 days)                  |             |  |
| <i>Special Privilege Leave</i>                                       |   |             |  |
|  | Duly Filled-out Application for Leave (CS Form No. 6, Revised 2020) | One         | At least one week prior to availment, except on emergency cases          |
| <i>Solo Parent Leave</i>   |   |             |  |
|  | Duly Filled-out Application for Leave (CS Form No. 6, Revised 2020) | One         | At least five days before going on leave                                 |
|  | Updated Solo Parent Identification Card                             |             |  |
| <i>Compensatory Time-Off charged to Compensatory Overtime Credit</i> |   |             |  |
|  | Duly Filled-out Application for Leave (CS Form No. 6, Revised 2020) | One         | At least five days before going on leave                                 |

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|   |   |     |   |
|---|---|-----|---|
| <b>Daily Time Record</b>  | Daily Time Record (Biometrics Print-out and Hand-written by the employee) (CS Form No. 48)  | One | Every 5 <sup>th</sup> day of the succeeding month (if the 5 <sup>th</sup> day falls on a Saturday, Sunday, or Holiday, the deadline of submission would be the last working day prior to the 5 <sup>th</sup> day of the succeeding month) |
| <i>For Official Business Travel (Additional requirements)</i>           |   |     |   |
|   | Locator Slip  | One |   |
|   | Travel Authority  | One |   |
|   | Certificate of Appearance   | One |   |
|   | Memorandum (if applicable)  | One |   |
| <i>For Personal Business Travel (Additional requirements)</i>           |   |     |   |
|   | Individual Pass/Employee Slip   | One |   |
| <i>Biometrics Malfunction (Additional requirements)</i>                 |   |     |   |
|   | Photocopy of Guard's Log Book duly certified by the Records Officer/Administrative Division Chief/authorized representative   | One |   |
|   | Functional Division Employee's Log sheet duly certified by the Division Chief/Authorized representative   |     |   |
| <i>Leave of Absence</i>   |   |     |   |
|   | Approved Application for Leave and attachments (if Applicable)  | One |   |
| <b>Statement of Assets, Liabilities, and Net worth</b>                  | SALN- Required by R.A. 6713 (Revised as of January 2015)  | One | Every last working day of March   |
| <b>Personal Data Sheet</b>  | PDS-CS Form No. 212, Revised 2017   | One | Every last working day of April   |
| <b>Cancellation of Approved Leave</b>                                   | Letter request for a cancellation of leave, signed by the employee, noted by the immediate head/Division Chief, and approved by the Regional Director/authorized representative       | One | Within one month from date of schedule of leave   |
|   | Approved Application for Leave  | One |   |
| <b>Change of Schedule of Leave</b>                                      | Letter request for a change of schedule of leave, signed by the employee, noted by the immediate head/Division Chief, and approved by the Regional Director/authorized representative | One | Within one month from date of schedule of leave   |
|   | Approved Application for Leave  | One |   |
| <i>For Official Travel (Additional requirements)</i>                    |   |     |   |
|   | Travel Authority  | One |   |
|   | Certificate of Appearance   | One |   |
| <i>For Activities Conducted in the Office (Additional requirements)</i> |   |     |   |
|   | Memorandum/Notice of Meeting  | One |   |
|   | Daily Time Record (Hand-written by the employee)  | One |   |
| <i>If Requested to Report to Office (Additional requirements)</i>       |   |     |   |
|   | Justification letter signed by the employee, noted by the immediate head/Division Chief, and approved by the Regional   | One |   |

|   |  |     |   |
|---|--|-----|---|
|   | Director/authorized representative   |     |   |
|   | Daily Time Record (Hand-written by the employee)   | One |   |
| <b>Reversion of Mandatory/Forced Leave</b>                              | Letter request for a reversion of leave, signed by the employee, noted by the immediate head/ Division Chief, and approved by the Regional Director/ authorized representative | One | Within one month from date of schedule of leave |
|   | Approved Application for Leave   | One |   |
| <i>For Official Travel (Additional requirements)</i>                    |  |     |   |
|   | Travel Authority   | One |   |
|   | Certificate of Appearance  | One |   |
| <i>For Activities Conducted in the Office (Additional requirements)</i> |  |     |   |
|   | Memorandum/Notice of Meeting   | One |   |
|   | Daily Time Record (Hand-written by the employee)   | One |   |
| <i>If Requested to Report to Office (Additional requirements)</i>       |  |     |   |
|   | Justification letter signed by the employee, noted by the immediate head/Division Chief, and approved by the Regional Director/authorized representative                       | One |   |
|   | Daily Time Record (Hand-written by the employee)   | One |   |

2. All photocopies must be duly certified by the Records Officer/Administrative Division Chief/authorized representative.
3. Immediate dissemination of and strict compliance with this Memorandum are desired.

for: *[Signature]*  
**EVELYN R. FETALVERO, CESO III**  
 Regional Director *[Signature]*

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