

For Use of Regulated Agencies Only

APPOINTMENT TRANSMITTAL AND ACTION FORM

AGENCY: DEPARTMENT OF EDUCATION - DIVISION OF PANABO CITY

CSC FO In-Charge:

Cesar JR Villanueva
4P Specialist

For CSC RO/FO's Use:

Date Received:

OCT 04 2023

3:15

INSTRUCTIONS:

- (1) Fill-out the data needed in the form completely and accurately.
- (2) Do not abbreviate entries in the form.
- (3) Accomplish the Checklist of Common Requirements and sign the certification.
- (4) Submit the duly accomplished form in electronic and printed copy (2 copies) to the CSC Field Office-In-Charge together with the original copies of appointments and supporting documents.

No.	NAME OF THE APPOINTEE/S				POSITION TITLE (indicate parenthetical title, if applicable)	SALAR Y/ JOB/ PAY GRADE	EMPLOYMENT STATUS	PERIOD OF EMPLOYMENT (for Temporary, Casual/ Contractual Appointments) (mm/dd/yyyy to mm/dd/yyyy)	NATURE OF APPOINTMENT	DATE OF ISSUANCE (mm/dd/yyyy)	PUBLICATION		CSC ACTION			Agency Receiving Officer
	Last Name	First Name	Name Extension (Jr. / III)	Middle Name							DATE indicate period of publication (mm/dd/yyyy to mm/dd/yyyy)	MODE (CSC Bulletin of Vacant Positions, Agency Website, Newspaper, etc)	A - Approved or D - Disapproved or N - Noted	Date of Action (mm/dd/yyyy)	Date of Release (mm/dd/yyyy)	
1	LABAD	ROLAND	n/a	SEROY	SPECIAL SCIENCE TEACHER I	13-1	PERMANENT	n/a	REAPPOINTMENT	09/04/2023	n/a	n/a				
2	LEQUIN	MELVIN	n/a	FRANCISCO	SPECIAL SCIENCE TEACHER I	13-1	PERMANENT	n/a	REAPPOINTMENT	09/05/2023	n/a	n/a				
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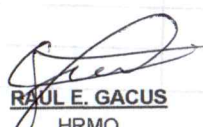

This is to certify that the information contained in this form are true, correct and complete.

RAUL E. GACUS

HRMO

Date: 10-04-2023

REMARKS/COMMENTS/RECOMMENDATIONS: (e.g. Reasons for Disapproval of Appointment)

CHECKLIST OF COMMON REQUIREMENTS		HRMO	CSC FO
Instructions: Put a check if the requirements are complete. If incomplete, use the space provided to indicate the name of appointee and the lacking requirement/s.			
1	APPOINTMENT FORMS (CS Form No. 33-A, Revised 2018) - Three (3) original copies of appointment form (employee copy, CSC copy and agency copy)	/	/
2	PLANTILLA OF CASUAL APPOINTMENT (CSC Form No. 34-A, C, E or F) - Three (3) original copies (employee copy, CSC copy and agency copy)	N/A	N/A
3	PERSONAL DATA SHEET (CS Form No. 212, Revised 2017)	/	/
4	ORIGINAL COPY OF AUTHENTICATED CERTIFICATE OF ELIGIBILITY/ RATING/ LICENSE - Except if the eligibility has been previously authenticated in 2004 or onward and recorded by the CSC	N/A	N/A
5	7 for 2604 POSITION DESCRIPTION FORM (DBM-CSC Form No. 1, Revised 2017)	/	/
6	OATH OF OFFICE (CS Form No. 32, Revised 2017)	/	/
7	CERTIFICATE OF ASSUMPTION TO DUTY (CS Form No. 4)	/	/
		<p>This is to certify that I have checked the veracity, authenticity and completeness of all the requirements in support of the appointments attached herein.</p> <p> RAUL E. GACUS HRMO</p>	<p>This is to certify that I have checked all the requirements in support of the appointments attached herein and found these to be [] complete / [] lacking.</p> <p> Renee JR Villanue C: 4P Specialist CSC FO Receiving Officer</p>