



Republic of the Philippines
Department of Education
 REGION V - BICOL

TANGGAPANG PANSANGAY NG CATANDUANES

August 27, 2024

DIVISION MEMORANDUM

No. 404 s. 2024

**INSTRUCTIONS ON THE APPLICATION FOR LEAVE & COMPENSATORY TIME OFF
 AND STRICT IMPLEMENTATION ON THE USE OF PASS SLIP
 IN THE SDO AND SCHOOLS**

TO : Assistant Schools Division Superintendent
 SGOD & CID Chiefs and Personnel
 OSDS Unit Heads and Personnel
 Elementary & Secondary School Heads/OICs
 School-based Teaching & Non-Teaching Personnel

1. To ensure a consistent and prompt action on personnel application for leave, compensatory time off and pass slip, the following procedures shall be strictly implemented in the SDO and in the schools effective September 2, 2024.

ON APPLICATIONS FOR LEAVE AND COMPENSATORY TIME OFF

- a) Application for leave must be submitted within the prescribed period (printed at the back of the leave form). **Except for Sick Leave, no personnel should go on leave without the approval of authorities.** It should be understood that leaves may be disapproved by authorities in exigency of service.
- b) To ensure proper identification of job groups, the application forms for leave and compensatory time off will be color coded as follows:
SDO- Proper Personnel – light green
School Heads - yellow
Teachers - white
School based Non-Teaching Personnel – light blue
- c) Application for leave shall be printed in 8.5"x13" colored paper, while the application for compensatory time off shall be printed in 8.5"x11" colored paper using the DepEd prescribed format. Reformatting of the forms is highly discouraged. Samples are enclosed to this memorandum.
- d) Approving Authority for Leaves should follow DepEd Order No. 1, s. 2023 "Revised Designation of Undersecretaries and Assistant Secretaries to Their Strands and Functional Areas of Responsibilities and Revised Signing Authorities":

Office/ Position	Up to 60 Calendar Days		More than 60 Calendar Days to One (1) Year	
	Recommending Approval	Approval	Recommending Approval	Approval
Schools Division Office				
SDS/ASDS	ARD	RD	ARD	Undersecretary for Operations
Division Chief	ASDS	SDS		



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TANGGAPANG PANSANGAY NG CATANDUANES

Below Division Chief	Division Chief	ASDS	Division Chief and ASDS	SDS
Schools				
School Head/Head Teacher/TIC	ASDS	SDS	ASDS	SDS
Teaching and Non-Teaching Personnel	School Head	ASDS	School Head and ASDS	SDS

- e) The Approving Authority for Compensatory Time Off per CSC-DBM Joint Circular No. 2. s. 2004 "Non-Monetary Remuneration for Overtime Services Rendered" will be:

Office/Position	Recommending Approval (Immediate Head of Employee)	Approval
Schools Division Office		
Division Chief/Legal Officer/ITO/AOV/Accountant/AOIV	ASDS	SDS
Below Division Chief/ Below OSDS Unit Heads	Chief/ Administrative Officer V-Admin.	SDS
Schools		
School Head/Head Teacher/TIC	ASDS	SDS
Non-Teaching/Related-Teaching Personnel/ALS Teachers	School Head	SDS

ON PASS SLIP

- a) Section 1 of Rule XVIII, Omnibus Rules Implementing Book V of the 1987 Administrative Code as amended by CSC Memorandum Circular No. 01 series 1994 provides:

"It shall be the duty of each head of department or agency to require all officers and employees under him to strictly observe the prescribed office hours. When the head of Office, in the exercise of his discretion, allows government officials and employees to leave the office during office hours **not for official business, but to attend socials/events/functions and/or wakes/interments**, the same shall be reflected in their time cards and **charged to their leave credits.**"

- b) To ensure time-on-task, and for monitoring of the whereabouts of personnel during government working hours, this Office shall strictly implement the use of Pass Slip.
- c) **Pass Slip** shall be used for **personal transactions only** and should only be issued when extremely necessary and only for a brief period of time within the day.
- d) All personnel of this Division shall accomplish the Pass Slip before leaving the premises of the SDO proper or their respective office/school.



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- i. **For SDO-Proper**- Pass slip shall be secured from the Office of Administrative Officer V, to be filled in and signed by the employee, noted by the immediate head and approved by the AOV for Administrative Services (for the OSDS) and Chief (for CID and SGOD)
 - ii. **For Secondary Schools with Administrative Officer IV**- Pass slip shall be secured from the Office of the Administrative Officer IV, to be signed by the employee, noted by the immediate head, and approved by the School Principal.
 - iii. **For Schools with Administrative Officer II** – Pass slip shall be secured from the Office of the Administrative Officer II, to be signed by the employee and approved by the School Head.
 - iv. **For Schools without Administrative Officer** – the pass slip shall be signed by the employee and approved by the School Head.
 - v. **For School Head** - The pass slip shall be approved by the PSDS. A mechanism may be agreed upon by the School Head and the PSDS on how approval may be sought if the District Office is not within the premises of the school.
 - vi. **For PSDS** – The pass slip shall be approved by the CID Chief. A mechanism may be agreed upon by the PSDS and the CID Chief on how approval may be sought considering that they are not reporting in the SDO Proper which is the official station of the CID Chief.
- e) The duly accomplished Pass Slip shall be surrendered to the Guard-on-Duty/Watchman upon leaving the premises of the SDO/School. Employee shall record their time of departure and arrival at a Pass Slip Logbook which shall be attested by the Security Guard on-duty/Watchman.

The logbook shall be photocopied by the Human Resource Office Personnel in-charge/Administrative Officer IV for Implementing Schools, every first day of the succeeding month for proper notation or for the purpose of updating leave balances of concerned employees and/or the Form 7 - Monthly Payroll Worksheet & Report of Service.

For schools without Security Guard/Watchman, the Administrative Officer/School Head shall take charge. The Administrative Officer II assigned in the district shall submit the same to the Personnel Section every 5th day of the succeeding month and update the leave balances of the concerned employees and/or update the Form 7 - Monthly Payroll Worksheet & Report of Service.

- f) The Security Guards-on-duty/Watchmen are instructed to diligently carry out their duties and functions within their respective jurisdiction.
- g) The number of hours/minutes an employee incurred outside the office/school during government working hours and not on official



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- business shall be deducted from their vacation leave credits/salary. In the case of teachers, it shall be deducted from their salary.
- h) Employees leaving the office/school premises for reasons unrelated to official business do so at their own risk. The office/school bears no liability for any circumstances that may arise while they are outside.
 - i) Pass Slip shall be printed in 8.5"x11" bond paper similar to the Locator Slip. Samples are enclosed to this memorandum for reference. Reformatting of the forms is highly discouraged.
 - j) Approving Authority for Pass Slip should follow Division Memorandum No. 388, s. 2024 "Grant of Authority to Sign on Locator Slips in SDO Catanduanes" issued on August 16, 2024.
2. Loafing is strictly discouraged and deemed inappropriate for government employees and shall be subject to proper disciplinary action/s, if warranted.
3. For information, guidance, and strict compliance.


CECILE C. FERRO CESO VI
Asst. Schools Division Superintendent
Officer In-Charge
Office of the Schools Division Superintendent



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TANGGAPANG PANSANGAY NG CATANDUANES

Enclosure 1 to Division Memorandum No. ____ s.2024
APPLICATION FOR LEAVE

Civil Service Form No. 6
 Revised 2020

Republic of the Philippines
Department of Education
 REGION V
 SCHOOLS DIVISION OFFICE OF CATANDUANES

DATE of Date of Receipt

APPLICATION FOR LEAVE

1. OFFICE/DEPARTMENT _____ 2. NAME: (Last) _____ (First) _____ (Middle) _____

3. DATE OF FILING _____ 4. POSITION _____ 5. SALARY ₱ _____

6. DETAILS OF APPLICATION

6.A TYPE OF LEAVE TO BE AVAILED OF

- Vacation Leave (Dec. 31, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- Mandatory/Forced Leave (Dec. 25, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- Sick Leave (Dec. 43, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- Maternity Leave (R.A. No. 11210 / RR issued by CSC, DOLE and 935)
- Paternity Leave (R.A. No. 8187 / CSC MC No. 71, s. 1928, as amended)
- Special Privilege Leave (Dec. 21, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- Solo Parent Leave (R.A. No. 8472 / CSC MC No. 6, s. 2054)
- Study Leave (Dec. 58, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- 10-Day VAWC Leave (R.A. No. 9262 / CSC MC No. 15, s. 2005)
- Rehabilitation Privilege (Dec. 35, Rule XVI, Omnibus Rules Implementing E.O. No. 252)
- Special Leave Benefits for Women (R.A. No. 8710 / CSC MC No. 25, s. 2013)
- Special Emergency (Calamity) Leave (CSC MC No. 2, s. 2012, as amended)
- Adoption Leave (R.A. No. 8552)

Others: _____

6.B DETAILS OF LEAVE

In case of Vacation/Special Privilege Leave:

- Within the Philippines
- Abroad (Specify) _____

In case of Sick Leave:

- In Hospital (Specify Illness) _____
- Out Patient (Specify Illness) _____

In case of Special Leave Benefits for Women:
 (Specify Illness) _____

In case of Study Leave:

- Completion of Master's Degree
- BAR/Board Examination Review

Other purpose:

- Monetization of Leave Credits
- Terminal Leave

6.C NUMBER OF WORKING DAYS APPLIED FOR

INCLUSIVE DATES _____

6.D COMMUTATION

- Not Requested
- Requested

(Signature of Applicant) _____

7. DETAILS OF ACTION ON APPLICATION

7.A CERTIFICATION OF LEAVE CREDITS
 As of _____

	Vacation Leave	Sick Leave
Total Earned		
Less this application		
Balance		

(Authorized Officer) _____

7.B RECOMMENDATION

- For approval
- For disapproval due to _____

(Authorized Officer) _____

7.C APPROVED FOR
 _____ days with pay
 _____ days without pay
 _____ others (Specify) _____

(Authorized Official) _____

7.D DISAPPROVED DUE TO:

FORM

Form 6 can be downloaded at <https://bit.ly/ApplicationforLeaveForm6>



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Enclosure 2 to Division Memorandum No. ____ s.2024
APPLICATION FOR COMPENSATORY TIME OFF FORM

CTO - Leave Form
 Revised 2023



Stamp of Date of Receipt

APPLICATION FOR COMPENSATORY TIME OFF (CTO)

1. SCHOOL/DISTRICT/OFFICE		2. NAME: (Last) (First) (Middle)										
3. DATE OF FILING		4. POSITION		5. SALARY P								
6. DETAILS OF APPLICATION												
6.A DETAILS OF COMPENSATORY TIME OFF <input type="checkbox"/> Vacation Leave <input type="checkbox"/> Sick Leave		Signature of Applicant										
6.B NUMBER OF WORKING DAYS APPLIED FOR												
6.C INCLUSIVE DATES												
7. DETAILS OF ACTION ON APPLICATION												
7.A CERTIFICATION OF COMPENSATORY OVERTIME CREDIT As of _____		7.B RECOMMENDATION										
<table border="1" style="width: 100%;"> <thead> <tr> <th colspan="2">COMPENSATORY OVERTIME CREDIT</th> </tr> </thead> <tbody> <tr> <td>Total Earned</td> <td></td> </tr> <tr> <td>Less this application</td> <td></td> </tr> <tr> <td>Balance</td> <td></td> </tr> </tbody> </table>		COMPENSATORY OVERTIME CREDIT		Total Earned		Less this application		Balance		<input type="checkbox"/> FOR APPROVAL <input type="checkbox"/> FOR DISAPPROVAL DUE TO		
COMPENSATORY OVERTIME CREDIT												
Total Earned												
Less this application												
Balance												
(Authorized Officer)		(Authorized Official)										
7.C APPROVED FOR: _____ days with pay		7.D DISAPPROVED DUE TO: _____										

CTO form can be downloaded at <https://bit.ly/CTOForms>



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Enclosure 3 to Division Memorandum No. ____ s.2024

PASS SLIP FOR SDO PROPER PERSONNEL

P A S S S L I P

Control No. _____

Date: _____

Name: _____

Section/Division: _____

Permission is requested to leave the office premises during office hours:

Intended time of Departure : _____
Intended time of Arrival : _____

Note:

- a. Pass Slip shall be used for **personal transactions** only and should only be issued for a short period when extremely necessary.
- b. The number of hours/minutes an employee incurred outside the office during government working hours and not on official business **shall be deducted from their vacation leave credits or salary if there are no available vacation leave credits.**

SIGNATURE OVER PRINTED NAME OF EMPLOYEE

SIGNATURE OVER PRINTED NAME OF IMMEDIATE HEAD

APPROVED:

SIGNATURE OVER PRINTED NAME
ADMINISTRATIVE OFFICER V – ADMINISTRATIVE SERVICES (FOR THE OSDS)
CHIEF (FOR SGOD AND CID)

Pass Slip can be downloaded at <https://bit.ly/Passlip>



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Enclosure 4 to Division Memorandum No. ____ s.2024

PASS SLIP FOR IMPLEMENTING UNITS

P A S S S L I P

Control No. _____

Date: _____

Name: _____

School: _____

Permission is requested to leave the school premises during office hours:

Intended time of Departure : _____

Intended time of Arrival : _____

Note:

- Pass Slip shall be used for **personal transactions only** and should only be issued for a short period when extremely necessary.
- The number of hours/minutes an employee incurred outside the office/school during government working hours and not on official business **shall be deducted from their vacation leave credits or salary if no available vacation leave credits. In the case of teachers, it shall be deducted from their salary.**

SIGNATURE OVER PRINTED NAME OF EMPLOYEE

SIGNATURE OVER PRINTED NAME OF IMMEDIATE HEAD

APPROVED:

SIGNATURE OVER PRINTED NAME OF SCHOOL PRINCIPAL

Pass Slip can be downloaded at <https://bit.ly/Passlip>



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Enclosure 5 to Division Memorandum No. ____ s.2024

PASS SLIP FOR OTHER SCHOOLS

P A S S S L I P

Control No. _____

Date: _____

Name: _____

School: _____

District: _____

Permission is requested to leave the school premises during office hours:

Intended time of Departure : _____

Intended time of Arrival : _____

Note:

- Pass Slip shall be used for **personal transactions only** and should only be issued for a short period when extremely necessary.
- The number of hours/minutes an employee incurred outside the office/school during government working hours and not on official business shall be **deducted from their vacation leave credits or salary if no available vacation leave credits**. In the case of **teachers, it shall be deducted from their salary**.

SIGNATURE OVER PRINTED NAME OF EMPLOYEE

APPROVED:

SIGNATURE OVER PRINTED NAME OF SCHOOL HEAD

Pass Slip can be downloaded at <https://bit.ly/Passlip>



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Enclosure 6 to Division Memorandum No. ____ s.2024

PASS SLIP FOR PSDS AND SCHOOL HEADS

P A S S S L I P

Control No. _____

Date: _____

Name : _____

School : _____

District : _____

DepEd email address: _____

Permission is requested to leave the school premises during office hours:

Intended time of Departure: _____

Intended time of Arrival: _____

Note:

- Pass Slip shall be used for **personal transactions only** and should only be issued for a short period when extremely necessary.
- The number of hours/minutes an employee incurred outside the office/school during government working hours and not on official business shall be **deducted from their vacation leave credits or salary if no available vacation leave credits**. In the case of **teachers, it shall be deducted from their salary**.

SIGNATURE OVER PRINTED NAME OF EMPLOYEE

APPROVED:

PSDS (for School Heads)/ CID Chief (for PSDSs)

Pass Slip can be downloaded at <https://bit.ly/Passlip>



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Enclosure 7 to Division Memorandum No. ____ s.2024

PASS SLIP LOGBOOK

(To be stationed at the Guard House and photocopied by the Human Resource Office Personnel/ Administrative Officer IV for Implementing Schools, every first day of the succeeding month for proper notation or for the purpose of updating leave balances of concerned employees and/or the Form 7 Monthly Payroll Worksheet & Report of Service).

Control Number	Name of Employee	Actual Time of Departure	Signature of Employee	Actual Time of Arrival	Signature of Employee	Attested by Guard-on-Duty/ Watchman



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