April 24, 2020

MEMORANDUM TO:

OIC, Office of the Asst. Schools Division Superintendent
Chief Education Supervisors, CID and SGOD
Elementary and Secondary Schools Principals
Officers-in-Charge
All Concerned

ADVISORY

“PICTURE FORMAT OR SCANNED COPY OF FORM 6” AND
“ACKNOWLEDGMENT EMAIL IN LIEU OF ACTUAL SIGNATURE OF THE
RECOMMENDING OR APPROVING OFFICIAL” FOR APPLICATIONS FOR
MONETIZATION DURING THE ENHANCED COMMUNITY QUARANTINE (ECQ)
RELATIVE TO THE COVID-19 OUTBREAK

In view of the current ECQ implementation, in observance of the protocol mandated by RA 11469 or the “Bayanihan to Heal as One Act “, and City Ordinance No.49 s. 2020 or “Strict Home Quarantine Implementation Ordinance”, insofar as application for monetization is concerned, the applicant shall observe the following alternative mechanism:

The applicant shall send, using his or her DepEd email, a picture or scanned copy of the accomplished Form 6 and Letter of Intent to the recommending official and the latter must email back stating his or her consent or recommendation thereto, using his/her DepEd email, as well. Kindly indicate in the email subject: RECOMMENDATION FOR APPROVAL/DISAPPROVAL OF THE APPLICATION FOR MONETIZATION OF (state applicant’s full name).

Such reply and the picture or scanned copy of the accomplished Form 6 and Letter of Intent shall then be forwarded by the applicant to the HRMO via maryrose.indemne@deped.gov.ph.

Please note that this modified procedural scheme is being adapted for convenience and expediency and shall be coterminous with the ECQ period, thus, automatically reverted soon as the same is lifted.

Immediate and urgent dissemination of this Advisory is desired.

SHERYLL T. GAYOLA (Sgd.)
Education Program Supervisor
Officer-In-Charge
Office of the Schools Division Superintendent
Date

MS. SHERYLL T. GAYOLA
Education Program Supervisor
Officer-In-Charge
Office of the Schools Division Superintendent
Marikina City

Madam:

Please allow me to use my LEAVE CREDITS for 2020 Monetization for purposes of:

- [ ] Health, medical and hospital needs
- [ ] Financial aids and assistance
- [ ] Education needs
- [ ] Payment of mortgage and loan
- [ ] Home Repair/Improvement
- [ ] Others (pls. specify) ________________________

Thank you.

Very truly yours,

[Signature]

APPROVED:

SHERYLL T. GAYOLA
Education Program Supervisor
Officer-In-Charge
Office of the Schools Division Superintendent
APPLICATION FOR LEAVE

CSC Form No. 6
Revised 1984

1. OFFICE / AGENCY
2. NAME (Last) (First) (Middle)

3. DATE OF FILING
4. POSITION
5. SALARY (Monthly)

6. DETAILS OF APPLICATION

6a) TYPE OF LEAVE
   • Vacation
     ○ To seek employment
     ○ Others (specify)
   • Sick
   • Maternity
     ○ Others (specify)

6c) NUMBER OF WORKING DAYS APPLIED FOR

INCLUSIVE DATES:

6b) WHERE LEAVE WILL BE SPENT:
   1. IN CASE OF VACATION LEAVE
      ○ Within the Philippines
      ○ Abroad (specify) 
   2. IN CASE OF SICK LEAVE
      ○ In Hospital (specify) 
      ○ Out Patient (specify)
   d) COMMUTATION
      ○ Requested ○ Not Requested

Signature of applicant

7. DETAILS OF ACTION OF APPLICATION

7a) CERTIFICATION OF LEAVE CREDITS
   As of

<table>
<thead>
<tr>
<th>Vacation</th>
<th>Sick</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days</td>
<td>Days</td>
<td>Days</td>
</tr>
</tbody>
</table>

ARACELI D. DY
Head Teacher III
OIC, Human Resource Management Office

7c) APPROVED FOR:
   ________ days with pay
   ________ days without pay
   ________ others (specify)

7e) RECOMMENDATION
   ○ Approval
   ○ Disapproval due to

Section Head / School Head

7d) DISAPPROVED DUE TO:

CLARO L. CAPCO
Administrative Officer V

SHERYLL T. GAYOLA
Education Program Supervisor
Officer-In-Charge
Office of the Schools Division Superintendent
NOTE: This is APPLICABLE ONLY for IMPLEMENTING UNITS (IUs); shall be requested first prior to sending of request for Recommendation for Approval/Disapproval of Application to School Head. Each applicant from IUs shall attach a copy of the Certification in their email.

CERTIFICATION

This is to certify that this Office has available funds and has no pending accounts payable for the following:

- Mandatory Utilities
- Salaries for Job Order and Contract of Service Personnel
- Prior Years Accounts Payable for Mandatory Remittances for Personal Share and Government Share to GSIS, Pag-IBIG and Philhealth as of March 31, 2020
- Salaries of Teaching and Non-Teaching Personnel both for RPSU paid and supplementary payroll
- Salary Differentials as of March 31, 2020

This certification is being issued for the payment of Monetization purposes.

Given this __________ day of April, 2020.

_________________________
Administrative Assistant III

_________________________
School Head