



Republic of the Philippines
Department of Education
REGION VII – CENTRAL VISAYAS
SCHOOLS DIVISION OF NEGROS ORIENTAL

**Office of the Schools Division
Superintendent**

DIVISION MEMORANDUM
NO. 641 s. 2022

AUG 15 2022

**GUIDELINES ON THE SUBMISSION OF DOCUMENTS FOR HUMAN
RESOURCE MANAGEMENT UNIT (HRMU) TRANSACTIONS**

TO: Assistant Schools Division Superintendents
Chief, CID & SGOD
Public School District Supervisors/ District In-Charge
Public Elementary/Secondary School Heads
Teaching/Non-Teaching Personnel
All Others Concerned

1. This is to inform the field that after thorough discussion with the school and district in-charge (**Administrative Assistants and Administrative Officers**) of personnel services and processes during the virtual conference, this office through the **Human Resource Management Unit (HRMU)** will now require an attached checklist of requirements in submitting documents for the following HRMU transactions **effective August 17, 2022**:

- SALARY ADJUSTMENT DUE TO STEP INCREMENT/PROMOTION
- SALARY DIFFERENTIAL DUE TO STEP INCREMENT/PROMOTION
- APPLICATION FOR EQUIVALENT RECORD FORM (ERF)
- SUBSTITUTE TEACHER APPOINTMENT
- RENEWAL OF SHS PROVISIONAL APPOINTMENT
- CHANGE OF STATUS (FROM PROVISIONAL TO PERMANENT)
- SPECIAL HARDSHIP ALLOWANCE
- SERVICE CREDITS/VACATION CREDITS CLAIM
- MONETIZATION OF LEAVE CREDITS
- GSIS MULTI-PURPOSE (MPL), EMERGENCY, COMPUTER & POLICY LOANS
- CHANGE OF MARITAL STATUS & CORRECTION OF NAME & DATE OF BIRTH (GSIS RECORDS)
- UPDATE OF STATION TRANSFERRED IN FROM OTHER DIVISION/GOVERNMENT AGENCY (GSIS)
- UPDATE OF EMPLOYMENT STATUS DUE TO RETIREMENT/SEPARATION (GSIS)
- UPDATE OF SALARIES DUE TO PROMOTION/STEP INCREMENTS/SALARY INCREASE & ONE SALARY HIGHER (RA 4760) - GSIS
- ISSUANCE OF TAX IDENTIFICATION NUMBER (TIN) & UPDATING OF BIR RECORDS
- LEAVE APPLICATIONS
 - SICK LEAVE
 - SPECIAL LEAVE FOR WOMEN (RA 9710)
 - REHABILITATION LEAVE
 - EXHAUSTION OF SERVICE CREDITS/LEAVE CREDITS PRIOR TO RETIREMENT



Address: Kagawasan Avenue, Capitol Area, Davao, Dumaguete City
Telephone Nos.: (035) 225-2838 / 225-2376 / 422-7644
Email Address: negros.oriental@deped.gov.ph



Republic of the Philippines
Department of Education
REGION VII – CENTRAL VISAYAS
SCHOOLS DIVISION OF NEGROS ORIENTAL

- MATERNITY LEAVE
- VACATION LEAVE (WITHIN THE PHILIPPINES)
- TRAVEL ABROAD

- REINSTATEMENT TO DUTY
- CORRECTION OF NAME/CHANGE OF NAME & STATUS
- RETIREMENT/RESIGNATION/SEPARATION
- DISABILITY RETIREMENT
- TERMINAL LEAVE BENEFIT
- SURVIVORSHIP BENEFIT CLAIM
- TRANSFER TO OTHER DIVISION/AGENCY
- SALARY CLAIMS OF NEWLY HIRED PERMANENT TEACHING AND NON-TEACHING PERSONNEL
- PAYROLL INCLUSION
- SALARY CLAIMS OF SUBSTITUTE TEACHERS
- MATERNITY BENEFIT CLAIM (DURING SUMMER)
- SALARY CLAIM (AFTER LEAVE OF ABSENCE WITHOUT PAY)
- SUBSEQUENT SALARY CLAIMS (PERMANENT PERSONNEL & SUBSTITUTE TEACHER)
- PAYMENTS OF BENEFITS

2. The checklist of requirements (hereto attached) must be checked as to completeness of documents and signed by the school or district in-charge (**Administrative Assistant or Administrative Officer**). Soft copies of the list of requirements can be downloaded through this google drive link <https://bit.ly/3SPICOG>

3. Documents without attached checklist of requirements or not signed by the school and district in-charge **will not be accepted**.

4. Endorsement from the Public Schools District Supervisor (PSDS) is a must in every transaction stated above while SDO personnel shall submit the same applicable requirements directly to the personnel in-charge of the HRMU.

5. Incomplete documents received will be return by the personnel in-charge of the HRMU with a return slip (sample attached) and must be complied immediately.

6. A maximum of five (5) instances of returned documents will require a letter of explanation addressed to the Schools Division Superintendent.

7. It is desired that this Memorandum be given widest dissemination.

SENEN PRISCILLO P. PAULIN, CESO V
Schools Division Superintendent

8/15/22

SPP/NLR/AdSP/LBY/jad/
August 15, 2022



Address: Kagawasan Avenue, Capitol Area, Daro, Dumaguete City
Telephone Nos.: (035) 225-2838 / 225-2376 / 422-7644
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REGION VII – CENTRAL VISAYAS
SCHOOLS DIVISION OF NEGROS ORIENTAL

Document Return Slip (DRetS)
(District of _____)

School: _____

School Head: _____

School Year: _____

Title of Transaction	Reason/s for Returning	Action/s to be Taken	Re-submission Due on:

**Attach this form to the revised document upon re-submission.*

Checked by: _____

Date Returned: _____

Noted by: JIAN A. DIAZ
Administrative Officer IV

Date Received: _____

Received: _____



Address: Kagawasan Avenue, Capitol Area, Daro, Dumaguete City
Telephone Nos.: (035)225-2838 / 225-2376 / 422-7644
Email Address: negros.oriental@deped.gov.ph

SPECIAL HARDSHIP ALLOWANCE

(2 copies each)

Checklist of Requirements:

- ☐ Daily Time Record (DTR)
☐ Updated Service Record
☐ Form 1 (Monthly Computation)

Checked by : _____
School/District In-charge

SERVICE CREDITS/VACATION CREDITS CLAIM

(1 copy each)

School : _____
District : _____
Activity : _____

- ☐ Endorsement from PSDS & School Head
☐ Summary Service Rendered
☐ DTR
☐ Accomplishment Report
☐ Memorandum
☐ Certification from COMELEC (for Election)
☐ Designation signed by SDS (for Property Custodian)

Checked by : _____
School/District In-charge

MONETIZATION

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- ☐ Indorsement from PSDS & School Head (1 copy only)
☐ Letter of Intent (with Noted by: SDS name at the lower part)
☐ Fully filled out Form 6 (Revised 2020)
☐ Medical Certificate (medical reasons)
☐ Updated Service Record
☐ Updated NOSI/NOSA
☐ Designation signed by SDS (for ALS Teacher)
☐ Certificate of availability of funds (IUS)

Checked by : _____
School/District In-charge

BIR TRANSACTION

(2 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____

FOR ISSUANCE OF TAX IDENTIFICATION NUMBER

- ☐ BIR Form 1902
☐ Approved Appointment/Assignment Advice

FOR UPDATING OF BIR RECORDS

- ☐ BIR Form 1902 and 1905
☐ For UPDATE OF EMPLOYER
(Attached Approved Appointment/Assignment Advice)
☐ For CHANGE STATUS
(Attached Marriage Certificate)
☐ For Additional Dependents
(Attached BIRTH CERTIFICATE)

Checked by : _____

EQUIVALENT RECORD FORM CHECKLIST
(FOR TEACHER II)

Name : _____
Position : _____
Division/School: _____

- _____ Endorsement from the PSDS
- _____ Duly accomplished ERF – 5 copies
- _____ At least 1 year or more teaching experience with CAR or MA graduates or;
Bachelor's degree and 20 years in service or
Bachelor's degree and 18 MA units and 6 years in service
Bachelor's degree and 15 MA units and 8 years in service
- _____ Original copy of Certification from School Registrar for MA Units or C.A.R.
- _____ TOR with Certification, Authentication and Verification (CAV) from CHED – original copy
- _____ Updated Service Record – 3 original copies
- _____ Performance Rating for the last 3 School Years (certified photocopy signed by the

Administrative

- _____ Officer, District Supervisor and School Head)
– 1 copy/year (in consecutive order)
- _____ Duly accomplished CS Form 212 (Personal Data Sheet) – 3 original copies
- _____ Sworn Statement that all documents submitted are true and correct with documentary stamp (original copy)
- _____ Latest approved appointment – 3 certified true copies
- _____ Latest Payslip or Payroll – 1 certified true copy
- _____ Latest Plantilla (PSIPOP) – 1 certified true copy
- _____ Certificates of trainings, seminars, workshops, awards – certified true copies
- _____ Certification that the incumbent of the position to be Reclassified qualifies to occupy the new position

Checked by : _____
School/District In-charge

EQUIVALENT RECORD FORM CHECKLIST
(FOR TEACHER III)

Name : _____
Position : _____
Division/School: _____

- _____ Endorsement from the PSDS
- _____ Duly accomplished ERF – 5 copies
- _____ At least 3 years or more teaching experience with CAR/MA graduate or 20 years teaching experience with 20 or more MA units
- _____ Original copy of Certification from School Registrar for MA Units or C.A.R.
- _____ TOR with Certification, Authentication and Verification (CAV) from CHED – original copy
- _____ Updated Service Record – 3 original copies
- _____ Performance Rating for the last 3 School Years (certified photocopy signed by the

Administrative

- _____ Officer, District Supervisor and School Head)
– 1 copy/year (in consecutive order)
- _____ Duly accomplished CS Form 212 (Personal Data Sheet) – 3 original copies
- _____ Sworn Statement that all documents submitted are true and correct with documentary stamp (original copy)
- _____ Latest approved appointment – 3 certified true copies
- _____ Latest Payslip or Payroll – 1 certified true copy
- _____ Latest Plantilla (PSIPOP) – 1 certified true copy
- _____ Certificates of trainings, seminars, workshops, awards – certified true copies
- _____ Certification that the incumbent of the position to be Reclassified qualifies to occupy the new position

Checked by : _____
School/District In-charge

EQUIVALENT RECORD FORM CHECKLIST (FOR MASTER TEACHERS)

Name : _____
Position : _____
Division/School : _____

- _____ Endorsement from the PSDS
- _____ Duly accomplished ERF – 5 copies
- _____ **Must be at least CAR or Master's degree**
- _____ Position Description Form 1- 3 copies
- _____ Original copy of Certification from School Registrar for CAR OR MA/Doctoral degree
- _____ TOR with an original copy of the Certification, Authentication and Verification (CAV) from CHED (Master's/Doctoral degree)
- _____ College TDR (Bachelor's degree)
- _____ Duly accomplished CS Form 212 (Personal Data Sheet) – 3 original copies
- _____ Updated Service Record – 3 original copies
- _____ Performance Rating for the last 3 School Years (certified photocopy signed by the Administrative Officer, District Supervisor and School Head) – 1 copy/year (in consecutive order)
- _____ Certification that the applicant is actually teaching with regular teaching load supported by a **CLASSROOM PROGRAM**
- _____ Certificate as a **DEMONSTRATION TEACHER**
- _____ Division ranklist signed by the SD5-certified true copy
- _____ Certification on the number and names of teachers to be assigned/served by MT1 in the district
- _____ *MT5's (secondary)-5-7 teachers/subject area in the same organizational unit
- _____ *MT 5 (elementary)-total number of teachers including MT'5 in the district
- _____ Organizational chart with item numbers/subject areas
- _____ For ELEMENTARY- District and School Organizational chart
- _____ For SECONDARY-School and Organizational chart with item number and subject areas of specialization under his/her supervision
- _____ Latest approved appointment – 3 certified true copies
- _____ Latest Payslip or Payroll – 1 certified true copy
- _____ Latest Plantilla (P5IPOP) – 1 certified true copy
- _____ Certificates of trainings, seminars, workshops, awards – certified true copies
- _____ Justification Statement signed by the SD5
- _____ Classroom Program which includes teachers under his/her supervision
- _____ Sworn Statement that all documents submitted are true and correct with documentary stamp (original copy)
- _____ Computation worksheet for MT positions (MT I, MT II)
- _____ Must be Teacher III per DEC5 order no. S4, series of 1993

Checked by : _____
School/District In-charge

EQUIVALENT RECORD FORM CHECKLIST (FOR HEAD TEACHERS)

Name : _____
Position : _____
Division/School : _____

- _____ Endorsement from the PSDS
- _____ Letter request approved by the PSDS
- _____ Duly accomplished ERF – 5 copies
- _____ Original Certification from School Registrar for CAR OR MA/Doctoral units/ degree
- _____ TDR with an original copy of the Certification, Authentication and Verification (CAV) from CHED (Master's/Doctoral degree)
- _____ Division ranklist signed by SD5 -3 certified true copies
- _____ Position Description Form (PDF) – 3 copies
- _____ Justification/Certification on the status of higher rank applicant /ranklist
- _____ Updated Service Record – 3 original copies
- _____ Performance Rating for the last 3 School Years (certified photocopy signed by the Administrative Officer, District Supervisor and School Head) – 1 copy/year (in consecutive order)
- _____ Duly accomplished CS form 212 (Personal Data Sheet)-3 original copies
- _____ Sworn Statement that all documents submitted are true and correct with documentary stamp (1 original copy)
- _____ Latest approved appointment – 3 certified true copies
- _____ Latest Payslip or Payroll – 1 certified true copy
- _____ Latest Plantilla (P5IPDP) – 1 certified true copy
- _____ Certificates of trainings, seminars, workshops, awards – certified true copies
- _____ Certification that the incumbent of the position be reclassified is qualified to occupy the new position
- _____ Organizational chart with subject areas and item number
- _____ List of Teachers supervised with subject areas and plantilla item numbers
- _____ Class program with subject areas and item numbers
- _____ SBM Task Force's certification as to rating obtained in the internal and external stakeholder's assessment
- _____ Division Selection and Promotions Board's Certification on the points obtained in the Psychological Attribute and Personality Traits Assessment
- _____ Enrollment Data (Form 3) in the present school assignment including the schools cluster handled, if any
- _____ NEAP Certification
- _____ Justification Statement signed by the SD5

Checked by : _____
School/District In-charge

EQUIVALENT RECORD FORM CHECKLIST
(FOR PRINCIPAL)

Name : _____
Position : _____
Division/School : _____

- _____ Endorsement from the PSDS
- _____ Letter request approved by the PSDS
- _____ Duly accomplished ERF – 5 copies
- _____ Original Certification from School Registrar for CAR OR MA/Doctoral units/ degree
- _____ TOR with an original copy of the Certification, Authentication and Verification (CAV) from CHED (Master's/Doctoral degree)
- _____ Division ranklist signed by SDS – 3 certified true copies
- _____ Position Description Form (PDF) 3 copies
- _____ Justification/Certification on the status of higher rank applicant /ranklist
- _____ Updated Service Record – 3 original copies
- _____ Performance Rating for the last 3 school years certified photocopy signed by AO/PSDS/SH – 1 copy/year (in consecutive order)
- _____ Duly accomplished CS form 212 (Personal Data Sheet) - 3 original copies
- _____ Sworn Statement that all documents submitted are true and correct with documentary stamp (original copy)
- _____ Latest approved appointment – 3 certified true copies
- _____ Latest Payslip or Payroll – 1 certified true copy
- _____ Latest Plantilla (PSIPOP) – 1 certified true copy
- _____ Certificates of trainings, seminars, workshops, awards – certified true copies
- _____ Certification that the incumbent of the position be reclassified is qualified to occupy the new position
- _____ Organizational chart with subject areas and item number
- _____ Principal's List of Teachers with subject areas and plantilla item numbers
- _____ SBM Task Force's Certification as to rating obtained in the internal and external stakeholder's assessment
- _____ Division Selection and Promotions Board's Certification on the points obtained in the Psychological Attribute and Personality Traits Assessment
- _____ Enrollment data (form 4) in the present school assignment, including the cluster schools handled, if any
- _____ Class program with subject areas and item numbers
- _____ Result of the Principal's qualifying exam
- _____ NEAP Certification
- _____ Justification Statement signed by the SDS

Checked by : _____
School/District In-charge

**REQUIREMENTS FOR MULTI-PURPOSE (MPL),
EMERGENCY, COMPUTER & POLICY LOANS**

- _____ * Original Payslip except Policy loan
_____ * Photocopy of Payslip for Policy loan

REMARKS:

Date: _____

Checked by: _____

**REQUIREMENTS FOR CORRECTION OF FIRST
NAME, MIDDLE NAME & DATE OF BIRTH**

- _____ * Original Birth Certificate (PSA)
_____ * Duly Accomplished Form E

REMARKS:

Date: _____

Checked by: _____

**REQUIREMENTS FOR UPDATE OF STATION OF
TEACHERS /NON TEACHING STAFF
TRANSFERRED IN FROM OTHER DIVISION/
OTHER GOVERNMENT AGENCY**

- _____ * Updated Service Record(PSA)
_____ * Duly Accomplished Form B

REMARKS:

District: _____

Date: _____

Checked by : _____

**REQUIREMENTS FOR CHANGE OF MARITAL
STATUS**

- _____ * Original Marriage Certificate
_____ * Duly Accomplished Form E

REMARKS:

District: -- _____

Date: _____

Checked by : _____

**REQUIREMENTS FOR UPDATE OF SALARIES
DUE TO PROMOTION/STEP INCREMENTS/
SALARY INCREASES & ONE SALARY HIGHER
(RA476D)**

- _____ * Updated Service Record
_____ * Duly accomplished Form C

REMARKS:

District: _____

Date: _____

Checked by : _____

**REQUIREMENTS FOR UPDATE OF EMPLOYMENT
STATUS DUE TO RETIREMENT/SEPARATION**

- _____ * Updated Service Record Indicating
Date of Separation/Retirement
_____ * Duly Accomplished Form D

REMARKS:

District: _____

Date: _____

Checked by : _____

SALARY DIFFERENTIAL DUE TO PROMOTION

Checklist of Requirements:

Name: _____

School/District : _____

2 Copies each of the following:

- ☐ Endorsement letter
- ☐ Payslip (*before & after adjustment – consecutive*)
- ☐ Appointment
- ☐ Updated Service Record
- ☐ Assumption to Duty
- ☐ BP Number

Remarks: _____

Checked by: _____

School/District In-Charge

NOTE: Incomplete documents will be automatically returned to the requesting party.

LOYALTY PAY

Checklist of Requirements:

Name: _____

School/District : _____

2 Copies each of the following:

- ☐ Letter of Request with Endorsement
- ☐ Certified photocopy of original appointment
(*1st appointment as permanent government employee*)
- ☐ Updated Service Record

Remarks: _____

Remarks: _____

Checked by: _____

NOTE: Incomplete documents will be automatically return to the requesting party.

REQUIREMENTS FOR SALARY DIFFERENTIAL DUE TO STEP INCREMENT

CHECKLIST:

2 COPIES

- ____ (2) Consecutive month payslips reflecting
The adjustment (Unadjusted Month and
Adjusted Month)
- ____ Approved Appointment
- ____ Updated Service Record
- ____ BP Number: _____

Checked by: _____

School/District In Charge

Note: Make sure the Approved Appointment' Date of Signing coincides the date presented in Updated Service Record

**SALARY ADJUSTMENT DUE TO STEP INCREMENT
(For Elementary)**

Checklist of Requirements:

Name : _____
Employee No. : _____
New Position/Step : _____
New Salary : _____
Division : _____
School/District : _____

- _____ One (1) Clear Copy Endorsement from SDS
- _____ One (1) Clear Copy Annex D
- _____ One (1) Clear Copy of NOSI
- _____ One (1) Clear copy of Approved Appointment
- _____ One (1) Clear Copy of Plantilla
- _____ One (1) Clear Copy of Latest Pay slip
- _____ Two (2) Clear Copies of Updated Service Record

Checked by: _____
School/District in Charge

Remarks: _____

GSIS Updated: **MAE ANN A. SUASIN**
Administrative Officer - II

Allotment Available: **LYDIA D. CACAS**
Budget Officer III

Funds Available: **MA. JENNIFER P. PIODOS**
Accountant III

**SALARY ADJUSTMENT DUE TO STEP INCREMENT
(For Secondary)**

Checklist of Requirements:

Name : _____
Employee No. : _____
New Position/Step : _____
New Salary : _____
Division : _____
School/District : _____

- _____ One (1) Clear Copy Endorsement from SDS
- _____ One (1) Clear Copy Annex D
- _____ One (1) Clear Copy of NOSI
- _____ One (1) Clear copy of Approved Appointment
- _____ One (1) Clear Copy of Plantilla
- _____ One (1) Clear Copy of Latest Pay slip
- _____ Two (2) Clear Copies of Updated Service Record

Checked by: _____
School/District in Charge

Remarks: _____

GSIS Updated: **MARIA ESTRELLITA D. CALIDGUID**
Administrative Assistant - III

Allotment Available: **LYDIA D. CACAS**
Budget Officer III

Funds Available: **MA. JENNIFER P. PIODOS**
Accountant III

**SALARY ADJUSTMENT DUE TO PROMOTION
(For Elementary)**

Checklist of Requirements:

Name : _____
 Employee No. : _____
 New Position/Step : _____
 New Salary : _____
 Division : _____
 School/District : _____

Division Office

Region Office

_____ 1 copy Endorsement from SDS
 _____ 2 copies _____ 1 copy Approved Appointment
 _____ 3 copies _____ 1 copy Updated Service Record
 _____ 2 copies _____ 1 copy Latest Pay slip
 _____ 2 copies _____ 1 copy Assumption to Duty
 _____ 1 copy Notice of Salary Adjustment
 _____ 1 copy Plantilla-approved by DBM/PSIDP
 _____ 1 copy Appointment of Incumbent Teacher
 _____ 1 copy GSIS BP Number: _____

Checked by: _____
 School/District in Charge

Remarks: _____

GSIS Updated: **MAE ANN A. SUASIN**
 Administrative Officer - II

Allotment Available: **LYDIA D. CACAS**
 Budget Officer III

Funds Available: **MA. JENNIFER P. PIODOS**
 Accountant III

**SALARY ADJUSTMENT DUE TO PROMOTION
(For Secondary)**

Checklist of Requirements:

Name : _____
 Employee No. : _____
 New Position/Step : _____
 New Salary : _____
 Division : _____
 School/District : _____

Division Office

Region Office

_____ 1 copy Endorsement from SDS
 _____ 2 copies _____ 1 copy Approved Appointment
 _____ 3 copies _____ 1 copy Updated Service Record
 _____ 2 copies _____ 1 copy Latest Pay slip
 _____ 2 copies _____ 1 copy Assumption to Duty
 _____ 1 copy Notice of Salary Adjustment
 _____ 1 copy Plantilla-approved by DBM/PSIOP
 _____ 1 copy Appointment of Incumbent Teacher
 _____ 1 copy GSIS BP Number: _____

Checked by: _____
 School/District in Charge

Remarks: _____

GSIS Updated: **MARIA ESTRELLITA D. CALIDGUID**
 Administrative Assistant - III

Allotment Available: **LYDIA D. CACAS**
 Budget Officer III

Funds Available: **MA. JENNIFER P. PIODOS**
 Accountant III

SUBSTITUTE TEACHER APPOINTMENT

- ☐ 1. Indorsement Letter from the PSDS (*c/o District Office*)
- ☐ 2. Proposal for Substitute Teacher Position (*c/o District Office*)
- ☐ 3. CS Form No. 212 revised 2017 (Personal Data Sheet)
- **2 original copies with latest passport size picture** ***subscribed and sworn*
- ☐ 4. Authenticated PRC License – **1 original; 1 photocopy**
- ☐ 5. CSC FDRM No. 1 Position Description Form – **2 copies**
- ☐ 6. CS FORM No. 4 Revised 2018 (Certification of Assumption to Duty) – **5 copies**
- ☐ 7. CS FORM No. 32 Revised 2018 (Oath of Office) – **5 copies**
- ☐ 8. CS FORM No. 211 Revised 2018 (Medical Certificate)
- **1 copy** ***attach photocopies of Blood Test, Urinalysis and Chest X-ray Results*
- ☐ 9. Birth Certificate – **1 copy**
- ☐ 10. Marriage Certificate (*for married woman only*) – **1 copy**
- ☐ 11. Valid NBI Clearance – **1 copy**
- ☐ 12. Transcript of Records – **1 copy**
- ☐ 13. Light Pink Folder

Note: All photocopied documents must be certified by the District Supervisor

Checked by : _____
School/District In-charge

CHANGE OF EMPLOYMENT STATUS (FROM PROVISIONAL TO PERMANENT)

- ☐ 1. Indorsement Letter from the PSDS (*c/o District Office*)
- ☐ 2. CS Form No. 212 Revised 2017 (Personal Data Sheet)
- **2 Original copies with latest passport size picture**
***subscribed and sworn*
- ☐ 3. Authenticated PRC License – **1 original; 1 photocopy**
- ☐ 4. CS FORM No. 4 Revised 2018 (Certification of Assumption to Duty) – **3 copies**
- ☐ 5. CS FORM No. 32 Revised 2018 (Oath of Office) – **3 copies**
- ☐ 6. CSC FORM No. 1 Position Description Form – **2 copies**
- ☐ 7. Transcript of Records – **1 copy**
***if w/ further studies*
- ☐ 8. Light Pink Folder

Note: FOR TVL TRACK – Please attach National Training Certificates II (NC II) and Trainer's Methodology Certificate I (TMC I) duly certified by TESDA (Appropriate to the specialization)

Checked by : _____
School/District In-charge

RENEWAL OF PROVISIONAL APPOINTMENT

- ☐ 1. Indorsement Letter from the PSDS (*c/o District Office*)
- ☐ 2. CS Form No. 212 Revised 2017 (Personal Data Sheet)
- **2 original copies with latest passport size picture**
***subscribed and sworn*
- ☐ 3. CS FORM No. 4 Revised 2018 (Certification of Assumption to Duty) – **3 copies**
- ☐ 4. CS FORM No. 32 Revised 2018 (Oath of Office) – **3 copies**
- ☐ 5. CSC FORM No. 1 Position Description Form – **2 copies**
- ☐ 6. Transcript of Records – **1 copy**
***if w/ further studies*
- ☐ 7. Light Pink Folder

Note: FOR TVL TRACK – Please attach National Training Certificates II (NC II) and Trainer's Methodology Certificate I (TMC I) duly certified by TESDA (Appropriate to the specialization)

Checked by : _____
School/District In-charge

**REQUIREMENTS FOR SALARY CLAIMS OF
SUBSTITUTE TEACHERS**

CHECKLIST: 2 COPIES

1. Indorsement Letter from the PSDS
2. Letter Request
3. Approved Appointment by the CSC
4. Assumption to Duty (CS Form 4)
5. Oath of Office (CS Form 32)
6. Form 48 (DTR)
7. Statement of Assets, Liabilities and Net Worth (SALN)

PLEASE ATTACHED PRINTED COPY OF ID NUMBERS OF:)

8. DBP ATM Account Number

REMARKS:

Certified Correct

DISTRICT/SCHOOL IN-CHARGE

SUBSEQUENT SALARY CLAIM

PERMANENT TEACHING /NON-TEACHING

- 1 Indorsement Letter
- 2 Form 7(duly signed by Ma'am L. Yurong)
- 3 Secondary Form 7(duly signed by Ma'am L. Yurong)
(with FDS, rate and step)
- 4 Form 48 (DTR) (pls. indicate Official hours for arrival
and departure)(Remarks for WFH and SWF)

Remarks _____

Certified Correct: _____

District/Sch. In- Charge

SUBSEQUENT SALARY CLAIM

SUBSTITUTE TEACHER

- 1 Indorsement Letter
- 2 Form 7(duly signed by Ma'am L. Yurong)
- 3 Secondary Form 7(duly signed by Ma'am L. Yurong)
(with FDS, rate and step)
- 4 Form 48 (DTR) (pls. indicate Official hours for arrival
and departure)(Remarks for WFH and SWF)
- 5 Copy of Approved appointment

Remarks _____

Certified Correct: _____

District/Sch. In- Charge

SALARIES AFTER LEAVE OF ABSENCE WITHOUT PAY

- 1 Indorsement Letter
- 2 Letter Request
- 3 Form 7(generated copy from the Region)
- 4 PVP Report (for summer)
Form 48 (DTR) (pls. indicate Official hours for arrival
and departure)(Remarks for WFH and SWF)
- 5 Latest payslip

PLEASE ATTACH PRINTED COPY OF ID NUMBERS OF:)

- 1 PHIC Number
- 2 PAGIBIG Number (MID)
- 3 GSIS BP Number (C/ODivOff)

Remarks _____

Certified Correct: _____

District/Sch. In- Charge

MATERNITY BENEFIT CLAIM DURING SUMMER

- 1 Indorsement Letter
- 2 Letter Request
- 3 Form 7(generated copy from the Region)
- 4 PVP Report (for summer)
- 5 S.O. for Reinstatement

Remarks _____

Certified Correct: _____

District/Sch. In- Charge

**REQUIREMENTS FOR SALARY CLAIM OF NEWLY
HIRED PERMANENT TEACHING/NON-TEACHING
PERSONNEL**

CHECKLIST: 2 COPIES EACH

- ☐ 1. Indorsement Letter from the PSDS
(c/o District Office)
- ☐ 2. Approved Appointment by SDS
- ☐ 3. Incumbent's Approved Appointment (if inherited item)
- ☐ 4. Assumption to Duty (Certification of First day of Service) CS Form 4
- ☐ 5. Oath of Office (CS Form 32)
- ☐ 6. Form 48 (DTR) (please indicate official hours for Arrival and departure) (Remarks for WFH & SWF)
- ☐ 7. Statement of Assets, Liabilities & Net Worth (SALN)
- ☐ 8. Approved BIR Form 1902 (for TIN application)
BIR Form 1905 (for update of employer)

PLEASE ATTACHED PRINTED COPY OF ID NUMBERS OF:

- ☐ 9. DBP ATM ACCOUNT NUMBER with Certification
Signed by the Cashier
- ☐ 10. Philhealth Number
- ☐ 11. PAGIBIG Number (MID)
- ☐ 12. GSIS BP NUMBER (c/o Div. Office)

In case of TRANSFER: 2 COPIES EACH

- ☐ 11. Clearance from the Previous Office/CLP
- ☐ 12. Certification of Last Salary and Benefits Received
To be verified by the Resident COA
- ☐ 13. Latest Payslip

REMARKS _____

Certified Correct: _____

DISTRICT/SCHOOL IN-CHARGE

REQUIREMENTS FOR REGULAR PAYROLL INCLUSION

NAME _____
FIRST NAME MIDDLE NAME LAST NAME

District: _____ School: _____

1 COPY EACH

- ☐ 1. Indorsement Letter from the PSDS
(c/o District Office)
- ☐ 2. Approved Appointment by Civil Service Commission
- ☐ 3. Incumbent's Approved Appointment (if inherited item)
- ☐ 4. Assumption to Duty (Certification of First day of Service) CS Form 4
- ☐ 5. Plantilla
- ☐ 6. Updated Service Record
- ☐ 7. PDS (CS FDRM 212) (should be filled out completely)
- ☐ 8. Approved BIR Form 1902 (for TIN application)
BIR Form 1905 (for update of employer)
- ☐ 9. Date of Birth _____
- ☐ 10. Marital Status _____
- ☐ 11. Sex _____
- ☐ 12. Position _____

PLEASE ATTACHED PRINTED COPY OF ID NUMBERS OF:

- ☐ 13. PAGIBIG Number (MID) _____
- ☐ 14. Philhealth Number _____
- ☐ 15. GSIS BP Number (c/o Div. Office) _____
- ☐ 16. TIN _____
- ☐ 17. DBP ATM ACCOUNT NUMBER with Certification
Signed by the Cashier

Certificate of Availability of Funds:

Funds Available:

MA. JENNIFER P. PIODOS
Accountant III

Allotment Available:

LYDIA D. CACAS
Budget Officer III

In case of TRANSFER:

- ☐ 1. Clearance from Previous Office/CLP
- ☐ 2. Certificate of Last Salary Received to be
verified by the Resident COA
- ☐ 3. Latest payslip

REMARKS _____

Certified Correct: _____

DISTRICT/SCHOOL IN-CHARGE

REQUIREMENTS FOR SALARY CLAIM OF NEWLY HIRED PERMANENT TEACHING/NON-TEACHING PERSONNEL

CHECKLIST: 2 COPIES EACH

- ☐ 1. Indorsement Letter from the PSDS
(c/o District Office)
- ☐ 2. Approved Appointment by SDS
- ☐ 3. Incumbent's Approved Appointment (if inherited item)
- ☐ 4. Assumption to Duty (Certification of First day of Service) CS Form 4
- ☐ 5. Oath of Office (CS Form 32)
- ☐ 6. Form 48 (DTR) (please indicate official hours for Arrival and departure) (Remarks for WFH & SWF)
- ☐ 7. Statement of Assets, Liabilities & Net Worth (SALN)
- ☐ 8. Approved BIR Form 1902 (for TIN application)
BIR Form 1905 (for update of employer)

PLEASE ATTACHED PRINTED COPY OF ID NUMBERS OF:

- ☐ 9. DBP ATM ACCOUNT NUMBER with Certification
Signed by the Cashier
- ☐ 10. Philhealth Number
- ☐ 11. PAGIBIG Number (MID)
- ☐ 12. GSIS BP NUMBER (c/o Div. Office)

In case of TRANSFER: 2 COPIES EACH

- ☐ 11. Clearance from the Previous Office/CLP
- ☐ 12. Certification of Last Salary and Benefits Received
To be verified by the Resident CDA
- ☐ 13. Latest Payslip

REMARKS _____

Certified Correct: _____
DISTRICT/SCHOOL IN-CHARGE

REQUIREMENTS FOR REGULAR PAYROLL INCLUSION

NAME _____
FIRST NAME MIDDLE NAME LAST NAME

District: _____ School: _____

1 COPY EACH

- ☐ 1. Indorsement Letter from the PSDS
(c/o District Office)
- ☐ 2. Approved Appointment by Civil Service Commission
- ☐ 3. Incumbent's Approved Appointment (if inherited item)
- ☐ 4. Assumption to Duty (Certification of First day of Service) CS Form 4
- ☐ 5. Plantilla
- ☐ 6. Updated Service Record
- ☐ 7. PDS (CS FDRM 212) (should be filled out completely)
- ☐ 8. Approved BIR Form 1902 (for TIN application)
BIR Form 1905 (for update of employer)
- ☐ 9. Date of Birth _____
- ☐ 10. Marital Status _____
- ☐ 11. Sex _____
- ☐ 12. Position _____

PLEASE ATTACHED PRINTED COPY OF ID NUMBERS OF:

- ☐ 13. PAGIBIG Number (MID) _____
- ☐ 14. Philhealth Number _____
- ☐ 15. GSIS BP Number (c/o Div. Office) _____
- ☐ 16. TIN _____
- ☐ 17. DBP ATM ACCOUNT NUMBER with Certification
Signed by the Cashier

Certificate of Availability of Funds:

Funds Available:	Allotment Available:
MA. JENNIFER P. PIODOS Accountant III	LYDIA D. CACAS Budget Officer III

In case of TRANSFER:

- ☐ 1. Clearance from Previous Office/CLP
- ☐ 2. Certificate of Last Salary Received to be
verified by the Resident CDA
- ☐ 3. Latest payslip

REMARKS _____

Certified Correct: _____
DISTRICT/SCHOOL IN-CHARGE

SICK LEAVE

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ Medical Certificate (5 days & above)
_____ School & District Clearance (1 month & above)
_____ Cert. of Service Credits Balance

Checked by : _____
School/District In-charge

SPECIAL LEAVE FOR WOMEN (RA 9710)

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ Medical Certificate (5 days & above)
_____ Histopathological Report
_____ Surgical Procedure
_____ School & District Clearance
_____ Updated Service Record

Checked by : _____
School/District In-charge

REHABILITATION LEAVE

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ Medical Certificate (indicating period of recuperation)
_____ School & District Clearance
_____ Police Report/Blotter
_____ Narrative Report signed by PSDS

Checked by : _____
School/District In-charge

EXHAUSTION OF SC/LC PRIOR TO RETIREMENT

(2 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ School & District Clearance
_____ Updated Service Credits Balance (for Teaching Personnel only)

Checked by : _____
School/District In-charge

MATERNITY LEAVE

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

_____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ Medical Certificate
_____ School & District Clearance

Checked by : _____
School/District In-charge

VACATION LEAVE (WITHIN THE PH)

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

_____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ School & District Clearance (1 month & above)

Checked by : _____
School/District In-charge

VACATION LEAVE (TRAVEL ABROAD)

(2 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

_____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Fully filled out Form 6 (Revised 2020)
_____ School & District Clearance
_____ Division Clearance
_____ Administrative Clearance
_____ Provident Fund Clearance/Certification
_____ Certification per Memo # 100, s. 1999
_____ Updated Service Record
_____ Photocopy of Payslip (1 month & above)

Note: Submission of application at least 45 days prior to the effective date of leave.

Checked by : _____
School/District In-charge

REINSTATEMENT

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

_____ Indorsement from PSDS & School Head
_____ Letter of Intent
_____ Medical Certificate (fit to work)
_____ Birth Certificate (for Maternity)

Checked by : _____
School/District In-charge

CHANGE/CORRECTION OF NAME

(1 copy each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
- _____ Letter of Intent
- _____ Marriage Contract (Photocopy only PSA)
- _____ Birth Certificate (for correction)
- _____ Appointment (Photocopy for correction)
- _____ Latest Payslip (Photocopy)

Checked by : _____
School/District In-charge

RETIREMENT/RESIGNATION/SEPARATION

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
- _____ Letter of Intent
- _____ GSIS Application for Retirement/
Separation/Life Insurance Benefit Claim
- _____ School and District Clearance
- _____ Updated Service Record with LAWOP
- _____ Division Clearance
- _____ Administrative Clearance
- _____ Provident Fund Clearance
- _____ GSIS Original Policy Contract (if available)
- _____ DTR/Approved Form 6 if on leave prior
- _____ Cert. of Performance Rating signed by PSDS
- _____ Summary of Absences for PVP Computation

*Note: (Please submit letter of Salary Stoppage at
least 1 month prior to the effective date of
separation.)*

Checked by : _____
School/District In-charge

TRANSFER TO OTHER DIV./AGENCY

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement addressed to New Div. /
Agency assigned
- _____ Special Order for Separation (DO)
- _____ Cert. of unused Leave Credits for
Non-Teaching (DO)
- _____ Indorsement from PSDS & School Head
- _____ Assignment Advice
- _____ Letter of Intent
- _____ Updated Service Record w/ (LAWOP)
- _____ School & District Clearance
- _____ Division Clearance
- _____ Administrative Clearance
- _____ Provident Fund Clearance
- _____ Cert. of Performance Rating signed by
PSDS
- _____ DTR/Approved Form 6 if on leave prior
- _____ Summary of Absences for PVP Computation

Checked by : _____
School/District In-charge

DISABILITY RETIREMENT

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Indorsement from PSDS & School Head
- _____ Letter of Intent
- _____ GSIS Application for Retirement/
Separation/Life Insurance Benefit Claim
- _____ GSIS Application for Disability Retirement
- _____ Proof of Disability Parts I, II, III
- _____ Medical Records
- _____ School and District Clearance
- _____ Updated Service Record with LAWOP
- _____ Division Clearance
- _____ Administrative Clearance
- _____ Provident Fund Clearance
- _____ GSIS Original Policy Contract (if available)
- _____ DTR for the last 3 months prior to Retirement
- _____ Sketch Plan from Residence to GSIS
- _____ Full Body Picture
- _____ Cert. of Performance Rating signed by PSDS
- _____ Summary of Absences for PVP Computation

*Note: (Please submit letter of Salary Stoppage at
least 1 month prior to the effective date of
separation.)*

Checked by : _____
School/District In-charge

TERMINAL LEAVE BENEFIT

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ Letter of Intent (with Approved by: SDS name
at the lower part)
- _____ Fully filled out CSC Form 6 (Revised 2020)
- _____ Certificate of Service Credits Balance (for
Teaching personnel only)
- _____ Last Approved Appointment
- _____ Affidavit of Applicant that He/She has no
Pending criminal/administrative case (RA
3019) notarized by the Lawyer or Mayor
- _____ Fiscal's Clearance from the place of
Assignment and Residence
- _____ GSIS Clearance
- _____ GSIS Retirement Adjudication of Annuity
Voucher
- _____ SALN

In case of Deceased Member:

- _____ Original/Certified true copy of Birth Cert. of
all children
- _____ Marriage Contract
- _____ Death Certificate
- _____ Proofs of Surviving Legal Heirs
- _____ Affidavit of relationship executed by the next
Kin (ages of children should be stated)
- _____ Extrajudicial Settlement designating one
payee

Checked by : _____
School/District In-charge

SURVIVORSHIP BENEFIT CLAIM

(3 copies each)

Name : _____
Emp. No. : _____
Position : _____
Code/School : _____
Salary : _____

- _____ GSIS Application for Retirement/
Separation/Life Insurance Benefit Claim
- _____ GSIS Application for Survivorship
- _____ Proof of Surviving Legal Heirs
- _____ Affidavit of Surviving Legal Heirs
- _____ Death Certificate (issued by PSA)
- _____ Photocopy of 2 valid ID's of witnesses with
signature
- _____ Extra judicial settlement among the legal heirs
designating one payee
- _____ School and District Clearance
- _____ Updated Service Record with LAWOP
- _____ Division Clearance
- _____ Administrative Clearance
- _____ Provident Fund Clearance
- _____ Summary of Absences for PVP Computation

Additional Documents for Married Member:

- _____ Marriage Contract of deceased member (PSA)
- _____ Birth Cert. of spouse if not GSIS member (PSA)
- _____ Birth Cert. of all children (PSA)
- _____ If with minor children/incapacitated children
Affidavit of Guardianship
- _____ If legal guardian is not the natural parent, the
Affidavit should be supported by a Certificate
from the Barangay or DSWD

Additional Documents for Single Member:

- _____ If with minor children/incapacitated children
Affidavit of Guardianship
- _____ If legal guardian is not the natural parent, the
Affidavit should be supported by a Certificate
from the Barangay or DSWD
- _____ If guardian is not a GSIS member, Birth Cert. (PSA)

If without primary beneficiary (with Parents)

- _____ Birth Cert. of member issued by PSA
- _____ Birth Cert. of member's parents issued by PSA
if parents are not GSIS members/pensioners
- _____ Marriage Contract of member's parents (PSA)

If without primary beneficiary (without Parents, with Siblings)

- _____ Birth Cert. of member issued by PSA
- _____ Birth Cert. of member's parents issued by PSA
- _____ Birth Cert. of all siblings (PSA)
- _____ Marriage Contract of member's parents (PSA)
- _____ Marriage Contract of all female siblings (PSA)
- _____ Death Cert. of member's parents (PSA)

For Muslim Member

- _____ Proof of Surviving Legal Heirs indicating all wives
and children
- _____ If only 1 spouse is claiming, submit duly notarized
Affidavit that her husband has no other marriages
or wife
- _____ Court Order for Guardianship in the absence of
parent for minor children
- _____ Endorsement by the office and Cert. indicating the
Legal Spouse/s and child/ren

Checked by : _____
School/District In-charge