CS Form No. 33-B
Revised 2017

(DILG)

CIVIL SERVICE COMMISSION
RECEIVED
DEC 2 9 2017
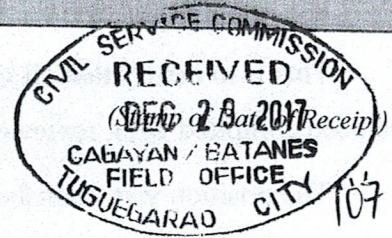(Stamp of Date of Receipt)
CAGAYAN / BATANES
FIELD OFFICE
TUGUEGARAO CITY
'07

Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
REGION 02
Regional Government Center, Carig Sur, Tuguegarao City, Cagayan

Mr./Mrs./ Ms.: **SCHOLASTICO DENNIS L. CARIÑO**

You are hereby appointed as <u>Local Government Operations Officer VI (SG-22)</u>

under ___Permanent___ status at the ___Department of the Interior and Local Government___ with
(Permanent, Temporary, etc)   (Office/Department/Unit)

a compensation rate of <u>Fifty-Two Thousand Seven Hundred Eighty-Three Pesos (P 52, 783.00)</u>

per month.

The nature of this appointment is "Reclassification of Position" with NOSCA Serial
(Original, Promotion, etc)

___No. 0002017-10-104___ vice _____, who

_____ with Plantilla Item No. <u>OSEC-DILGB-LGOO6-1134-2017</u>
(Transferred, Retired, etc.)

Page <u>10</u> of <u>22</u>.

This appointment shall take effect on the date of signing by the appointing
officer/authority.

Very truly yours,

(sgd.)

JONATHAN PAUL M. LEUSEN, JR., CESO IV
Regional Director
Appointing Officer/Authority

VALIDATED

(sgd.)

JOVY VL. MIGUEL
ACTING DIRECTOR II (12/29/17)
Accredited/Deregulated Pursuant to
CSC Resolution No. <u>031157</u>, s.2003
dated <u>November 17, 2003</u>

<u>November 21, 2017</u>
Date of Signing

(Stamp of Date of Release)

Certification

This is to certify that all requirements and supporting papers pursuant to CSC MC No. _____ have been complied with, reviewed and found to be in order.

The position was published at _____ EXEMPTED _____ from _____ to _____, 20_____ and posted in _____ from_____ to _____, 20_____ in consonance with RA No. 7041. Regional Personnel Selection and Promotion Board (RPSPB) started on _____, 2017.

(sgd.)

_____
EDNA V. MUNGCAL
Highest Ranking HRMO

Certification

This is to certify that the appointee has been screened and found qualified by the majority of the RPSPB during the deliberation held on _____.

_____
Chairperson, RPSPB

CSC/HRMO Notation

ACTION ON APPOINTMENTS			Recorded by
☐ **Validated per RAI for the month of** _____			
☐ **Invalidated per CSCRO/FO letter dated** _____			
☐ **Appeal**	DATE FILED	STATUS	
☐ CSCRO/ CSC-Commission			
☐ **Petition for Review**			
☐ CSC-Commission			
☐ Court of Appeals			
☐ Supreme Court			

Original Copy - for the Appointee
Original Copy - for the Civil Service Commission
Original Copy - for the Agency

Acknowledgement

Received original/photocopy of appointment on _____

_____
Appointee