



1. Service Record Processing

Issued to employees to affirm their employment in the City Government.

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Office or	City Human Resour	ces and Man	agement Office			
Division: Classification:	Simple (incumbent) Complex (separated)					
Type of		Complex (se	parateu)			
Transaction:	G2G – Government	to Governm	ent			
Who may avail:	Employees of the C	ity Governme	ent			
CHECKLIST OF F	REQUIREMENTS		WHERE TO SE	CURE		
For incumbent emp						
1. Request Form (1	Original Copy)	City Human Office (CHR	Resources and (MO)	Management		
For separated emp						
1. Appointment form		Requesting				
2. Old Service Reco		Requesting				
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON		
	ACTIONS	BE PAID	G TIME	RESPONSIBLE		
1. Secure and fill- out request form	1. Receive and process request form.	None	2 minutes	Staff CHRMO		
	1.1 Service Record forwarded to CHRMO Head for signature	None	2 days 23 hours (Icumbent)	Assistant Department Head CHRMO		
	1.2 Review and sign request form	None	4 working days 23 hours (separated)	City Human Resources Management Officer CHRMO		
2. Wait for the release of service record.	2. Release service record.	None	2 minutes	Staff CHRMO		
	TOTAL:	None	2 working days 23 hours 4 minutes (incumbent) 4 working days 23 hours 4 minutes (separated)			

City Human Resources and Management Office

Internal Services



2. Certificate of Employment

Employees who plan to separate from the City Government must secure a certificate of employment from the City Human Resources and Management Office, or as part of requirements for whatever purpose that it may serve.

Office or Division:	City Human Resources and Management Office					
Classification:	Simple (incumbent)	Complex (se	eparated)			
Type of Transaction:	G2G – Government	to Governm	ent			
Who may avail:	Employees of the C	ity Governme	ent			
CHECKLIST OF F	REQUIREMENTS		WHERE TO SE	CURE		
For incumbent emp	oloyee:					
1. Request Form (1	Original Copy)	City Human Office (CHR	Resources and RMO)	Management		
For separated emp	loyee:					
1. Appointment form	(1 Photocopy)	Requesting				
2. Old Service Reco		Requesting				
CLIENT STEPS	AGENCY	FEES TO	PROCESSIN	PERSON		
	ACTIONS	BE PAID	G TIME	RESPONSIBLE		
1. Secure and fill- out request form	 Receive and process request form. 1.1 Certificate of Employment forwarded to CHRMO Head for signature 1.2 Review and sign request form 	None	2 minutes 2 days 23 hours (Icumbent)	Staff CHRMO Assistant Department Head CHRMO City Human Resources Management Officer CHRMO		
2. Wait for the release of service record.	2. Release service record.					
	TOTAL:	None	2 Days 23 Hours 4 Minutes			



3. Application for Leave Processing

Leave of Absence is generally defined as a right granted to officials and employees not to report to work with or without pay as may be provided by law.

Office or	City Human Base	urces and Management Office	
Division:	City Human Resources and Management Office		
Classification:	Simple		
Type of Transaction:	G2G – Governme	nt to Government	
Who may avail:	Employees of the	City Government	
CHECKLIST OF R		WHERE TO SECURE	
1. Supporting papers as applicable:			
a) Vacation Lea i. Within th n/a	ave ne Philippines -	Requesting Party	
ii. Abroad -	Travel Authority,		
and worl	c accountability	SPJLAEH, RHU, GALIC	
a medica applican signed b	accompanied by al certificate that t is fit to work y the City Health 1 Original)		
b) Sick Leave i. Medical	Certificate signed	SPJLAEH, RHU, GALIC	
(1 Origin ii. In case r consulta availed - should b	nedical tion was not an affidavit e executed by the	Requesting Party	
c) Maternity Le i. Proof of	pregnancy	Government or Private Physician	
certificat	ind, doctor's e on the expected lelivery) (1	Requesting Party	
Allocatio Leave C	lished Notice of n of Maternity redits (CS Form f needed (1	SPJLAEH, RHU, GALIC	
iii. Leave ex	cceeding 3 days accompanied by al certificate that		
applican	t is fit to work	PSA, Government or Private Physician	





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signed by the City Health		of treatr	tment involved and	
Officer (1 Original)		the nee	ed to undergo rest,	
d) Paternity Leave			eration and	
i. Proof of child's delivery	Requesting Party	rehabilit	litation (1 Original)	
(birth certificate, medical		iv. Written	n concurrence of a	
certificate and marriage		governr	nment physician to	
contract) (1 Photocopy)		the reco	commendation for	
 e) Special Privilege Leave 		rehabilit	litation if the	SPJLAEH, RHU, GALIC
 Within the Philippines - 	SPJLAEH, RHU, GALIC	attendir	ing physician is a	
n/a		private	e practitioner,	
ii. Abroad - Travel Authority,			larly on the duration	
Clearance from money		of the p	period of	
and work accountability			litation (1 Original)	
 Leave exceeding 3 days 			exceeding 3 days	
shall be accompanied by		shall be	e accompanied by	
a medical certificate that	Requesting Party	a medic	ical certificate that	Government or Private Physician
applicant is fit to work		applicar	ant is fit to work	
signed by the City Health			by the City Health	
Officer (1 Original)			r (1 Original)	
f) Solo Parent Leave	Barangay		ave Benefits for	
i. Copy of updated Solo	Court	Women		
Parent Identification Card			al Certificate	
(1 Photocopy)		reflectin	•	
g) VAWC Leave			ological disorder	
i. Barangay Protection	Barangay, Court		shall be addressed	
Order (1 Photocopy)			addressed by the	
ii. Temporary/Permanent		• • •	y, Histopathological	
Protection Order (1			., .,	DSWD
Photocopy)			ique used for the	
iii. If BPO, TPO or PPO is not			y, Duration of the	
yet issued, a Certification			y including the per-	
issued by the Punong			ive period and	
Barangay/Kagawad or				Government or Private Physician
Prosecutor or the Clerk of	SPJLAEH, RHU, GALIC	Original		
Court that the application		j) Adoption Le		
for the BPO, TPO or PPO			nticated copy of the	
has been filed shall be			doptive Placement	
sufficient (1 Photocopy)			rity (1 Original	DUEDT
iv. Leave exceeding 3 days				BHERT
shall be accompanied by	Poquesting Portu	k) Quarantine		
a medical certificate that	Requesting Party Police Station	I. Certifica	cate issued by	
applicant is fit to work	Funce Station		inment/ private	
signed by the City Health Officer (1 Original)	Covernment or Brivate Bhysician		ian that applicant bmitted himself/	SPJLAEH, RHU, GALIC
h) Rehabilitation Leave	Government or Private Physician		f for monitoring/	
i. Letter Request (1 Original)			gation (1 Original)	
ii. Police Report, if any (1			letion of Quarantine	
Photocopy)	and the second se			Attending Physician
iii. Medical Certificate on the			uarantine/ health	Altending Physician
nature of injuries, course	Government Physician		(1 Original)	
nature of injunes, course	Coveninient i hysiolan	Unicial (





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iii. Medical Certificate that applicant is cleared to report back to work signed	RITM		Allocation of Maternity Leave Credits (CS Form No. 6a) if needed (1
by the City Health Officer			Original)
(1 Original)	Requesting Party		iii. Leave exceeding 3 days
iv. Medical Records showing	BHERT		shall be accompanied by
that applicant was treated			a medical certificate that
with Covid-19 signed by			applicant is fit to work
the attending physician (1			signed by the City Health
Original)			Officer (1 Original)
v. Copy of RT-PCR Test		d)	Paternity Leave
Result (1 Photocopy)			i. Proof of child's delivery
vi. Copy of Vaccination Card			(birth certificate, medical
(1 Photocopy)			certificate and marriage
vii. Copy of Barangay Contact			contract) (1 Photocopy)
Tracing form for identified		e)	Special Privilege Leave
close contacts with a			i. Within the Philippines -
suspect, probable and/or			n/a
confirmed cases of Covid-			ii. Abroad - Travel Authority,
19 (1 Photocopy)			Clearance from money
3. Supporting papers of the Applicant			and work accountability
as applicable:			Leave exceeding 3 days
a) Vacation Leave			shall be accompanied by
 Within the Philippines - 			a medical certificate that
n/a	Requesting Party		applicant is fit to work
ii. Abroad - Travel Authority,			signed by the City Health
Clearance from money			Officer (1 Original)
and work accountability	SPJLAEH, RHU, GALIC	f)	Solo Parent Leave
 Leave exceeding 3 days 			 Copy of updated Solo
shall be accompanied by			Parent Identification Card
a medical certificate that			(1 Photocopy)
applicant is fit to work		g)	VAWC Leave
signed by the City Health			i. Barangay Protection
Officer (1 Original)	SPJLAEH, RHU, GALIC		Order (1 Photocopy)
b) Sick Leave			ii. Temporary/Permanent
i. Medical Certificate signed	Requesting Party		Protection Order (1
by the City Health Officer			Photocopy)
(1 Original)			If BPO, TPO or PPO is not
ii. In case medical			yet issued, a Certification
consultation was not			issued by the Punong
availed - an affidavit	Government or Private Physician		Barangay/Kagawad or
should be executed by the			Prosecutor or the Clerk of
applicant (1 Original)			Court that the application
c) Maternity Leave			for the BPO, TPO or PPO
i. Proof of pregnancy	Requesting Party		has been filed shall be
(ultrasound, doctor's			sufficient (1 Photocopy)
certificate on the expected			iv. Leave exceeding 3 days
date of delivery) (1	EPA		shall be accompanied by
Original)	SPJLAEH, RHU, GALIC		a medical certificate that
ii. Accomplished Notice of			applicant is fit to work

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ite and marriage t) (1 Photocopy) /ilege Leave he Philippines -	
 Travel Authority, nee from money rk accountability exceeding 3 days accompanied by cal certificate that nt is fit to work by the City Health (1 Original) t Leave f updated Solo Identification Card ocopy) ve Requesting Party Barangay Court Barangay, Court 	
ay Protection 1 Photocopy) rary/Permanent ion Order (1 ppy) TPO or PPO is not red, a Certification by the Punong ay/Kagawad or utor or the Clerk of nat the application BPO, TPO or PPO en filed shall be	
At (1 Photocopy) exceeding 3 days e accompanied by cal certificate that th is fit to work	cian





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signed by the City Health Officer (1 Original) h) Rehabilitation Leave i. Letter Request (1 Original) ii. Police Report, if any (1 Photocopy) iii. Medical Certificate on the nature of injuries, course of treatment involved and the need to undergo rest, recuperation and	SPJLAEH, RHU, GALIC		ii. C c c iii. N a r	nas subm nerself for nvestigat Completic Certificate ocal quar official (1 Medical C applicant report bac	Certificate that is cleared to ck to work signed			
rehabilitation (1 Original) iv. Written concurrence of a government physician to the recommendation for rehabilitation if the attending physician is a private practitioner, particularly on the duration of the period of rehabilitation (1 Original) v. Leave exceeding 3 days shall be accompanied by	Government or Private Physician		(iv. N ti v v. C v. C vi. C vii. C vii. C	1 Origina Medical R hat applic with Covic he attenc Original) Copy of R Result (1 Copy of V 1 Photoc Copy of B	Records showing cant was treated d-19 signed by ling physician (1 RT-PCR Test Photocopy) (accination Card opy) Barangay Contact			
a medical certificate that applicant is fit to work signed by the City Health Officer (1 Original) i) Special Leave Benefits for Women	DSWD Government or Private Physician		c s c	close con suspect, p	orm for identified tacts with a probable and/or cases of Covid- tocopy)			
i. Medical Certificate reflecting the gynecological disorder			CLIENT ST	TEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
which shall be addressed or was addressed by the surgery, Histopathological	BHERT	fil	. Submissio lled-out pplication fo	or	1. Receive application form	None	3 minutes	Staff CHRMO
Report, Operative Technique used for the surgery, Duration of the	SPJLAEH, RHU, GALIC	n	eave form v ecessary ttachments,	, as	1.1 Process application	None	5 minutes	Staff CHRMO
surgery including the per- operative period and period of recuperation (1 Original) j) Adoption Leave	Attending Physician	a	pplicable		1.2 Forward application form to CHRMO Head for signature	None	2 minutes	Staff CHRMO
 i. Authenticated copy of the Pre-Adoptive Placement Authority (1 Original Authenticated Copy) k) Quarantine Requirements i. Certificate issued by 	RITM Requesting Party BHERT				1.3 Sign application form 1.4 Release	None	5 minutes	City Human Resources Management Officer CHRMO
government/ private					application for	None	5 minutes	Staff



	Leave			CHRMO
2. Same documents will be forwarded to the Department Head for recommendation	2. Approval/ Disapproval of Application for Leave from Department Head	None	-	Department Head Department Concerned
3. Same documents will be submitted to HR for recording	3. Receive Application for Leave with recommendation	None	5 minutes	Staff CHRMO
	3.1 Post on Leave Card	None	5 minutes	
	3.2 Record on system	None	5 minutes	
	3.3 Receive application form	None		Staff Office of the Mayor
	3.4 Sign Application for Leave form	None		City Mayor
	3.5 Receive signed application for leave.	None	5 minutes	Staff CHRMO
4. Receive Employee's Copy of the Application for Leave	4. Release Application for Leave	None	5 minutes	Staff CHRMO
	TOTAL:	None	45 Minutes (excluding time for Client Step 2 and Agency Action steps 3.3 to 3.4)	

Note: Total number of minutes is summed up based on the steps and services provided only by CHRMO.



4. Travel Order

Issued when travel is intended outside San Pedro

Office or	City Llumon Deseuros	and Man	agament Office				
Division:	City Human Resources and Management Office						
Classification:	Simple						
Type of		~					
Transaction:	G2G – Government to						
Who may avail:	Employees of the City	Employees of the City Government					
	CHECKLIST OF REQUIREMENTS WHERE TO SECURE						
filled out, and duly a Department Head/au case of the absence Head) (1 Original Co	of the Department	City Human Resources and Management Office, 4/F					
2. Pertinent documents to support TO such as but not limited to invitation letters, mission orders, authority to conduct such activity and the like. (1 Original Copy, 1 Photocopy)		Requesting party					
For department heads: Request Form properly accomplished, filled out, and duly approved by the City Mayor or City Administrator and Vice-Mayor (for Sangguniang Panlungsod) (1 Original Copy)		Office, 4/F					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID TIME RESPONSIBLE					
1. Submit Request Form	1. Receive request form	None	2 minutes	Staff CHRMO			
	1.1 Process request form	None	8 minutes	Staff CHRMO			
	1.2 Travel Order forwarded to CHRMO Head for signature	None	3 minutes	City Human Resources Management Officer CHRMO			
	1.3 Review and sign for recommending Approval.	None	None	City Administrator's Office			
0	1.4 Receive the duly signed Travel Order from the Administrator's Office	None	1 minute	Staff CHRMO			



	1.6 Receive the duly	None	1 minute	City Vice-Mayor City Vice- Mayor's Office Staff
	signed Travel Order from the City Mayor or City Vice-Mayor	None	Thindte	CHRMO
2. Receive Travel Order Form	2. Release Travel Order Form	None	2 minutes	CHRMO Staff
	TOTAL:	None	17 Minutes (excluding Action 1.3)	

Note: Total number of minutes is summed up based on the steps and services provided only by CHRMO.



5. Official Business

Issued when travel is within San Pedro area.

Office or Division:	City Human Resources and Management Office				
Classification:	Simple				
Type of Transaction:	G2G – Government to Government				
Who may avail:	Employees of the City	Governme			
	REQUIREMENTS		WHERE TO SE		
1. Request Form p filled out, and Department Head/a case of the absend Head) (1 original)	City Hur Office, 4	nan Resources ar /F	nd Management		
Form properly accor		Poquet	ing ports		
3. Pertinent docume as but not limited mission orders, autl activity and the like.	Request	ing party			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Submit Request Form	1. Receive request form	None	2 minutes	Staff CHRMO	
	1.1 Process request form	None	8 minutes	CHRMO Staff	
	1.2 Official Business slip forwarded to CHRMO Head for signature		3 minutes	City Human Resources Management Officer CHRMO	
2. Receive Official Business Slip	2. Release Official Business Slip	None	2 minutes	CHRMO Staff	
	TOTAL:	None	15 Minutes		