

# City Human Resources and Management Office Internal Services





## 1. Service Record Processing

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

Office or Division:	City Human Resources and Management Office			
Classification:	Simple (incumbent)	Complex (se	eparated)	
Type of				
Transaction:	G2G – Government to Government			
Who may avail:	Employees of the C	ity Governme	ent	
CHECKLIST OF I	REQUIREMENTS		WHERE TO SE	CURE
For incumbent emp	oloyee:			
1. Request Form (1	Original Copy)	City Human Office (CHF	Resources and RMO)	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-	1. Receive and	None	2 minutes	Staff
out request form	process request form.			CHRMO
	1.1 Service	None	2 days	Assistant
	Record forwarded		23 hours	Department
	to CHRMO Head		(Icumbent)	Head
	for signature		,	CHRMO
	1.2 Review and	None	4 working	City Human
	sign request form		days 23	Resources
			hours	Management
			(separated)	Officer
				CHRMO
2. Wait for the	2. Release service	None	2 minutes	Staff
release of service	record.			CHRMO
record.	TOTAL	None	0	
	TOTAL:	None	2 working days 23 hours 4 minutes (incumbent)	
			4 working days 23 hours 4 minutes (separated)	



### 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 (separated)			
Type of		Complex (30	<i>рагасси)</i>	
Transaction:	G2G – Government	to Governm	ent	
Who may avail:	Employees of the C	ity Governme	ent	
CHECKLIST OF I	REQUIREMENTS		WHERE TO SE	CURE
For incumbent emp	oloyee:			
1. Request Form (1	Original Copy)	City Human Office (CHF	Resources and	Management
For separated emp	lovee:	Omeo (0111	(IVIO)	
Appointment form		Requesting	Pary	
2. Old Service Reco	\ 13/	Requesting	•	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Secure and fill-	1. Receive and	None	2 minutes	Staff
out request form	process request form.			CHRMO
	1.1 Certificate of Employment forwarded to CHRMO Head for signature	None	2 days 23 hours (Icumbent)	Assistant Department Head CHRMO
	1.2 Review and sign request form	None		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 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.

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Office or	• • • • • • • • • • • • • • • • • • •		urces and Management Office
Division:	ioni	Cimple	
Classificat	.1011.	Simple	
Type of Transaction	n:	G2G – Governme	nt to Government
Who may a		Employees of the	City Covernment
		EQUIREMENTS	WHERE TO SECURE
		of the Applicant	WHERE TO GEOGRE
as applicab		or the Applicant	
	cation Lea	ave	
í.		e Philippines -	Requesting Party
	n/a		,
ii.	Abroad -	Travel Authority,	
		ce from money	
		k accountability	SPJLAEH, RHU, GALIC
iii.		ceeding 3 days	
		accompanied by	
		al certificate that	
		t is fit to work y the City Health	
	•	1 Original)	
b) Sic	k Leave	i Originar)	SPJLAEH, RHU, GALIC
i.	, , , , , , , , , , , , , , , , , , ,		or our lett, thro, or lete
		ity Health Officer	
	(1 Origin	•	Requesting Party
ii.	În case r		
	consulta	tion was not	
		an affidavit	
		e executed by the	
,		t (1 Original)	
	ternity Le		Government or Private Physician
I.		pregnancy	
	•	ind, doctor's e on the expected	Requesting Party
		lelivery) (1	Requesting Faity
	Original)	<b>3</b> / \	
ii.		ished Notice of	
	•	n of Maternity	SPJLAEH, RHU, GALIC
		redits (CS Form	
		f needed (1	
	Original)		
iii.		ceeding 3 days	
		accompanied by	
		al certificate that	DOA 0
	applican	t is fit to work	PSA, Government or Private Physician





		signed by the City Health	
رام	\ D	Officer (1 Original)	
u,		aternity Leave	Degreeting Dorty
	İ.		Requesting Party
		(birth certificate, medical	
		certificate and marriage	
_,		contract) (1 Photocopy)	
e,		pecial Privilege Leave Within the Philippines -	SDILAEU DULL CALIC
	I.	n/a	SPJLAEH, RHU, GALIC
	ii.		
	".	Clearance from money	
		and work accountability	
	iii	•	
		shall be accompanied by	
		a medical certificate that	Requesting Party
		applicant is fit to work	r toquosting r airty
		signed by the City Health	
		Officer (1 Original)	
f)	S	olo Parent Leave	Barangay
·	i.	Copy of updated Solo	Court
		Parent Identification Card	
		(1 Photocopy)	
g)	) V	AWC Leave	
	i.	<b>3</b> ,	Barangay, Court
		Order (1 Photocopy)	
	ii.	. ,	
		Protection Order (1	
	:::	Photocopy)	
	iii	,	
		yet issued, a Certification	
		issued by the Punong	
		Barangay/Kagawad or Prosecutor or the Clerk of	SPJLAEH, RHU, GALIC
		Court that the application	SFJEALTI, INTO, GALIC
		for the BPO, TPO or PPO	
		has been filed shall be	
		sufficient (1 Photocopy)	
	įν	. Leave exceeding 3 days	
		shall be accompanied by	
		a medical certificate that	Requesting Party
		applicant is fit to work	Police Station
		signed by the City Health	
		Officer (1 Original)	Government or Private Physician
h)	′ .	ehabilitation Leave	
	İ.	Letter Request (1 Original)	
	ii.	1 / 3 (	
	iii	Photocopy)	
	III		Covernment Physician
		nature of injuries, course	Government Physician





		of treatment involved and the need to undergo rest, recuperation and	
	iv	rehabilitation (1 Original) Written concurrence of a	
	١٧.	government physician to	
		the recommendation for rehabilitation if the	SPJLAEH, RHU, GALIC
		attending physician is a	, , , , , ,
		private practitioner, particularly on the duration	
		of the period of rehabilitation (1 Original)	
	٧.	Leave exceeding 3 days	
		shall be accompanied by a medical certificate that	Government or Private Physician
		applicant is fit to work signed by the City Health	·
		Officer (1 Original)	
i)	•	ecial Leave Benefits for omen	
	i.	Medical Certificate	
		reflecting the gynecological disorder	
		which shall be addressed	
		or was addressed by the surgery, Histopathological	
		Report, Operative Technique used for the	DSWD
		surgery, Duration of the	
		surgery including the per- operative period and	
		period of recuperation (1	Government or Private Physician
j)	Ad	Original) option Leave	
,	i.	Authenticated copy of the	
		Pre-Adoptive Placement Authority (1 Original	
k)	Ou	Authenticated Copy) parantine Requirements	BHERT
K)	i.	Certificate issued by	
		government/ private physician that applicant	SPJLAEH, RHU, GALIC
		has submitted himself/	
		herself for monitoring/ investigation (1 Original)	
	ii.	Completion of Quarantine	Attending Physician
		Certificate issued by the local quarantine/ health	Attending Physician
		official (1 Original)	





	iii.	Medical Certificate that	
		applicant is cleared to	
		report back to work signed	RITM
		by the City Health Officer	
		(1 Original)	Requesting Party
	ίV.	Medical Records showing	BHERT
		that applicant was treated	
		with Covid-19 signed by	
		the attending physician (1	
		Original)	
	٧.	Copy of RT-PCR Test	
		Result (1 Photocopy)	
	vi.	Copy of Vaccination Card	
		(1 Photocopy)	
	vii.	Copy of Barangay Contact	
		Tracing form for identified	
		close contacts with a	
		suspect, probable and/or	
		confirmed cases of Covid-	
		19 (1 Photocopy)	
3. Supp	orti	ng papers of the Applicant	
as appli	icab	ole:	
a)	Va	cation Leave	
	i.	Within the Philippines -	
		n/a	Requesting Party
	ii.	Abroad - Travel Authority,	
		Clearance from money	
		and work accountability	SPJLAEH, RHU, GALIC
	iii.	Leave exceeding 3 days	
		shall be accompanied by	
		a medical certificate that	
		applicant is fit to work	
		signed by the City Health	
	_	Officer (1 Original)	SPJLAEH, RHU, GALIC
( b)	Sic	k Leave	
	İ.	Medical Certificate signed	Requesting Party
		by the City Health Officer	
		(1 Original)	
	ii.	In case medical	
		consultation was not	O
		availed - an affidavit	Government or Private Physician
		should be executed by the	
	N 4	applicant (1 Original)	
1	_	ternity Leave	
	İ.	Proof of pregnancy	Requesting Party
		(ultrasound, doctor's	
		certificate on the expected	
		date of delivery) (1	
		Original)	SPJLAEH, RHU, GALIC
	ii.	Accomplished Notice of	





	Allocation of Maternity Leave Credits (CS Form No. 6a) if needed (1 Original)	
	iii. Leave exceeding 3 days shall be accompanied by a medical certificate that	PSA, Government or Private Physician
	applicant is fit to work signed by the City Health Officer (1 Original)	Requesting Party
d)	Paternity Leave	
	<ul> <li>Proof of child's delivery (birth certificate, medical certificate and marriage contract) (1 Photocopy)</li> </ul>	SPJLAEH, RHU, GALIC
e)	Special Privilege Leave i. Within the Philippines - n/a	
	ii. Abroad - Travel Authority, Clearance from money and work accountability	Requesting Party
	iii. Leave exceeding 3 days shall be accompanied by a medical certificate that	Barangay Court
	applicant is fit to work signed by the City Health Officer (1 Original)	Barangay, Court
f)	Solo Parent Leave	
	<ul><li>i. Copy of updated Solo Parent Identification Card (1 Photocopy)</li></ul>	
g)	VAWC Leave	
3/	i. Barangay Protection	SPJLAEH, RHU, GALIC
	Order (1 Photocopy)	
	ii. Temporary/Permanent Protection Order (1 Photocopy)	
	iii. If BPO, TPO or PPO is not	
	yet issued, a Certification	Requesting Party
	issued by the Punong	Police Station
	Barangay/Kagawad or Prosecutor or the Clerk of	Government or Private Physician
	Court that the application	
	for the BPO, TPO or PPO	
	has been filed shall be	
	sufficient (1 Photocopy) iv. Leave exceeding 3 days	Government Physician
	shall be accompanied by	,
	a medical certificate that	
	applicant is fit to work	





	signed by the City Health Officer (1 Original)	
h)	Rehabilitation Leave	
	i. Letter Request (1 Original)	
	ii. Police Report, if any (1	SPJLAEH, RHU, GALIC
	Photocopy) iii. Medical Certificate on the	
	nature of injuries, course	
	of treatment involved and	
	the need to undergo rest,	
	recuperation and	
	rehabilitation (1 Original)	Government or Private Physician
	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	
	a medical certificate that	DSWD
	applicant is fit to work	
	signed by the City Health	
	Officer (1 Original)	
i)	Special Leave Benefits for Women	Government or Private Physician
	i. Medical Certificate	
	reflecting the	
	gynecological disorder	
	which shall be addressed	BHERT
	or was addressed by the	
	surgery, Histopathological	OD II AELL DIIII CALIO
	Report, Operative Technique used for the	SPJLAEH, RHU, GALIC
	surgery, Duration of the	
	surgery including the per-	
	operative period and	Attending Physician
	period of recuperation (1	
	Original)	
j)	Adoption Leave	RITM
	<ul><li>i. Authenticated copy of the Pre-Adoptive Placement</li></ul>	Requesting Party
	Authority (1 Original	BHERT
	Authenticated Copy)	
k)	Quarantine Requirements	
	i. Certificate issued by	
	government/ private	





physician that applicant
has submitted himself/
herself for monitoring/
investigation (1 Original)

- ii. Completion of Quarantine Certificate issued by the local quarantine/ health official (1 Original)
- iii. Medical Certificate that applicant is cleared to report back to work signed by the City Health Officer (1 Original)
- iv. Medical Records showing that applicant was treated with Covid-19 signed by the attending physician (1 Original)
- v. Copy of RT-PCR Test Result (1 Photocopy)
- vi. Copy of Vaccination Card (1 Photocopy)
- vii. Copy of Barangay Contact Tracing form for identified close contacts with a suspect, probable and/or confirmed cases of Covid-19 (1 Photocopy)

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
Submission of filled-out     Application for	1. Receive application form	None	3 minutes	Staff CHRMO
Leave form with necessary attachments, as	1.1 Process application	None	5 minutes	Staff CHRMO
applicable	1.2 Forward application form to CHRMO Head for signature	None	2 minutes	Staff CHRMO
	1.3 Sign application form  1.4 Release	None	5 minutes	City Human Resources Management Officer CHRMO
	application for	None	5 minutes	Staff





Leave			CHRMO
2. Approval/ Disapproval of		-	Department Head
Leave from Department	None		Department Concerned
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	
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. Release Application for Leave	None	5 minutes	Staff CHRMO
TOTAL:	None	45 Minutes (excluding time for Client Step 2 and Agency Action steps	
	2. Approval/ Disapproval of Application for Leave from Department Head 3. Receive Application for Leave with recommendation 3.1 Post on Leave Card 3.2 Record on system 3.3 Receive application form 3.4 Sign Application for Leave form  3.5 Receive signed application for leave. 4. Release Application for Leave	2. Approval/ Disapproval of Application for Leave from Department Head  3. Receive Application for Leave with recommendation  3.1 Post on Leave Card  3.2 Record on system  3.3 Receive application form  3.4 Sign Application for Leave form   3.5 Receive signed application for leave.  4. Release Application for Leave None None None None None None None Non	2. Approval/ Disapproval of Application for Leave from Department Head 3. Receive Application for Leave with recommendation 3.1 Post on Leave Card 3.2 Record on system 3.3 Receive application form  3.4 Sign Application for Leave form  None  3.5 Receive application for Leave form  None  3.6 Receive signed application for Leave  None  TOTAL: None  None  Application Signed Application for Leave  None  Total: None  As Minutes (excluding time for Client Step 2 and)

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 Human Resources	and Man	agement Office	
Division:	City Human Resources and Management Office			
	Simple			
Type of	·			
Transaction:	G2G – Government to	Governm	ent	
Who may avail:	Employees of the City	Governme	ent	
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
1. Request Form prop		City Hun	nan Resources ar	nd Management
filled out, and duly ap	Office, 4	/F		
Department Head/aut	9 , (			
case of the absence of	•			
Head) (1 Original Cop		D		
	nts to support TO such to invitation letters,	Requesi	ing party	
	ority to conduct such			
	. (1 Original Copy, 1			
Photocopy)	. (1 Oliginal Copy, 1			
For department head	ds:			
Request Form proper	ly accomplished, filled	City Hun	nan Resources ar	nd Management
	ed by the City Mayor	Office, 4	/F	
1	and Vice-Mayor (for			
Sangguniang Panlur	ngsod) (1 Original			
Сору)		FFFO		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Request	1. Receive request	None	2 minutes	Staff
Form	form			CHRMO
	1.1 Process request	None	8 minutes	Staff
	form			CHRMO
	1.2 Travel Order	None	3 minutes	City Human
	forwarded to CHRMO	NOHE	3 minutes	Resources
	Head for signature			Management
				Officer
				CHRMO
	1.3 Review and sign	None	None	City
	for recommending			Administrator's
	Approval.			Office
<u> </u>	1.4 Receive the duly	None	1 minute	Staff
	1.4 Receive the duly signed Travel Order	None	1 minute	Staff CHRMO
	1.4 Receive the duly signed Travel Order from the	None	1 minute	Staff CHRMO





	1.5 Review and Sign	None	1 minute	City Mayor
	for approval.			City Mayor's
				Office
				Or
				City Vice-Mayor
				City Vice-
				Mayor's Office
	1.6 Receive the duly	None	1 minute	Staff
	signed Travel Order			CHRMO
	from the City Mayor			
	or City Vice-Mayor			
2. Receive Travel	2. Release Travel	None	2 minutes	CHRMO Staff
Order Form	Order Form	None	Z minutos	Of IT (IVIO Glaff
			17 Minutes	
	TOTAL:	None	(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 Government				
	IST OF REQUIREMENTS WHERE TO SECURE				
1. Request Form properly accomplished, filled out, and duly approved by Department Head/authorized signatory (in case of the absence of the Department Head) (1 original)		City Human Resources and Management Office, 4/F			
2. For all departments form properly according approved by the Administrator and Sangguniang Panlur	Paguast	ing party			
3. Pertinent documents to support OB such as but not limited to invitation letters, mission orders, authority to conduct such activity and the like. (1 photocopy/original)		Requesting 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	2. Release Official	None	2 minutes	CHRMO Staff	
Business Slip	Business Slip TOTAL:	None	15 Minutes		
	IOIAL.	HOHE	13 Milliares		