

OFFICE OF THE CITY HUMAN RESOURCE MANAGEMENT OFFICER

Internal Services



1. REQUEST FOR CERTIFICATE OF EMPLOYMENT (COE) AND SERVICE RECORDS (SR)

Employees of the City Government of Meycauayan may request for a Certificate of Employment or Service Record for any legal purposes it may serve them such as for verification of their employment, loan applications, claiming of benefits, etc.

Office or Division:	City Human Resource Ma	nagement Offic	е			
Classification:	Simple					
Type of Transaction:	G2G – Government to Go					
Who may avail:	Incumbent Officials and E	imployees of the				
CHECKLIST OF	REQUIREMENTS		WHERE TO	SECURE		
1. CHRMO Request Slip	– 2 copies	City Human Re	esource Manag	ement Office, 5th Floor		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Encode the details of request to the computer database and receive the CHRMO request slip form	Assist in entering in the comp database and is CHRMO request form	outer ssue	10 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office		
Submit duly filled-out CHRMO request slip	2.1 Check and re CHRMO request with written sched date of release	• 1	5 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office		
	2.2 Retrieve emplo service record forward to assig staff	and gned	5 minutes	Federic E. Montes Administrative Aide III City Human Resource Management Office		
	2.3 Prepare, requested docur and forward to the Human Reso Management Office authorized perso for review signature	City urce er or	15 minutes	Loida B. Init Senior Administrative Assistant I Cristina L. Peña Administrative Assistant II		



						City Human Resource Management Office
	2.4	Review requested o	and sign locument	None	1 working day	Judith S. Guevarra City Human Resource Management Officer Carmina C. Lim Administrative Assistant II City Human Resource Management Office
3. Return on the scheduled date, receive COE/SR and sign on the receiving copy (CHRMO request slip)	3.	Release COE / SR	requested	None	2 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
			Total	None	1 working day and 37 minutes	



2. REQUEST FOR LOCATOR AND PASS SLIPS

Office or Division:

All departures from the assigned work stations during office hours for the purpose of attending official assignments/business (other than with travel order) should be made with a duly approved locator slip. Pass slip is to be requested for the purpose of leaving the office during office hours for personal transaction such as paying bills, going to the bank, etc.

Any employee who leaves her work station without any approved locator or pass slip shall be considered to have incurred an undertime or an unauthorized absence and shall subject him/her to appropriate disciplinary action if warranted.

City Human Resource Management Office

Office or Divis	<u> </u>	City Human Resource Management Office				
Classification		Simple				
Type of Trans		G2G – Government to Gov				
Who may ava		Incumbent Officials and Er	nployees	s of the	•	•
		REQUIREMENTS			WHERE TO	SECURE
 Locator Sli Pass Slip I 	•	•	City Hu	uman R	Resource Mana	gement Office, 5 th Floor
CLIENT S	TEPS	AGENCY ACTIONS		ES TO PAID	PROCESSING TIME	PERSON RESPONSIBLE
locator / form	ignments / or personal on the database eive the pass slip	Assist in entering d in the computed database and issued to be a second	uter sue rm	lone	10 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
2. Submit accomplish locator / pa the Administra Office at 4 th approval	ass slip at City tor's th Floor for	2. Verify, record locate pass slip and forward the City Administration for approval	d to ator	lone	10 minutes	Madel Angelica V. Ramos Administrative Staff Jennifer S. Mendoza Administrative Assistant I Pia S. Ramirez-Delos Santos City Administrator City Administrator's Office
3. Receive locator / pa	approved ass slip	3. Release appro- locator / pass slip	/ed N	lone	1 minute	Madel Angelica V. Ramos Administrative Staff



			Jennifer S. Mendoza Administrative Assistant I City Administrator's Office
Total	None	21 minutes	

3. REQUEST FOR OVERTIME (OT) SERVICES

Employees who may accomplish tasks that cannot be done during regular hours can request an overtime (OT) pay.

Office or Division:	City Human Resource Management Office				
Classification:	Complex				
Type of Transaction:	G2G - Government to Gov	ernment/			
Who may avail:	Incumbent Officials and Er	mployees of the	City Governm	ent of Meycauayan	
CHECKLIST OF I	REQUIREMENTS		WHERE TO	SECURE	
Request for Overtime copies	Services Form – 2	City Human Re	esource Manag	ement Office, 5 th Floor	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Encode the details of request to the computer database and receive the request for OT services form Submit duly accomplished Request for Overtime Services	accomplished requestee to wait	duly None uest orm	10 minutes 5 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III	
form with Department Head's signature	the approval thro call/text 2.2. Compute tenta		2 working	City Human Resource Management Office Gemma G. Carpon	
	amount and forward	d to man nent	days	Administrative Aide I City Human Resource Management Office	



	personnel for review and initial			
2	.3. Review and initial	None	1 working days	Judith S. Guevarra City Human Resource Management Officer
				Carmina C. Lim Administrative Assistant II
				City Human Resource Management Office
2	.4. Record to logbook and forward to the City Budget Office for	None	5 minutes	Ferdinand SJ. Rafols Driver / Messenger
	budget appropriation			Federic E. Montes Administrative Aide III
				Gemma G. Carpon Administrative Aide I
				City Human Resource Management Office
2	.5. Review and sign	None	1 working day	Encarnita S. Angeles City Budget Officer City Budget Office
2	.6. Record to logbook and forward to the City Administrator's Office for recommending	None	5 minutes	Elena B. Inot Administrative Assistant II
	approval			Crisanto E. Sanchez Administrative Aide III City Budget Office
2	.7. Review and sign	None	1 working day	Pia S. Ramirez-Delos Santos City Administrator
				City Administrator's Office
2	.8. Record to logbook and forward to the City Mayor's Office for approval	None	5 minutes	Jennifer S. Mendoza Administrative Assistant I



				Yolanda P. Baldomero Administrative Aide I
				City Administrator's Office
	2.9. Review and sign	None	1 working day	Atty. Henry R. Villarica City Mayor
				City Mayor's Office
	2.10. Record to logbook and forward to the City Human Resource Management Office	None	5 minutes	Hershey B. Hong Justine Nicole M. Trinidad Administrative Aide I
				City Mayor's Office
	2.11. Record to logbook and inform requestee of the status of request through call / text	None	5 minutes	Gemma G. Carpon Administrative Aide I City Human Resource
3. Proceed to City	3. Release OT request	None	2 minutes	Management Office Ferdinand SJ. Rafols
3. Proceed to City Human Resource Management Office,	3. Release OT request	NOTIE	Z minutes	Driver / Messenger
5 th Floor, receive request and sign on the logbook				Federic E. Montes Administrative Aide III
тте тодроок				City Human Resource Management Office
	Total	None	6 working	
	10.00	.10.13	days and 42 minutes	



4. REQUEST FOR AVAILMENT OF COMPENSATORY TIME-OFF (CTO)

Compensatory Time-Off refers to the number of hours or days an employee is excused from reporting for work with full pay and benefits. It is a non-monetary benefit provided to an employee in lieu of overtime pay.

Office or Division:	City Human Resource Manage	ement Offic	<u>e</u>	
Classification:	Complex			
Type of Transaction:	G2G - Government to Governr	nent		
Who may avail:	Incumbent Officials and Emplo	yees of the	City Governm	nent of Meycauayan
CHECKLIST C	F REQUIREMENTS		WHERE T	O SECURE
Compensatory Time- Form – 2 copies	Off (CTO) Availment Request	City Hum Floor	an Resource N	Management Office, 5 th
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Encode details of request on the computer database and receive the CTO Availment request form	Assist in entering data in the computer database and issue CTO Availment request form	None	10 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
3. Submit duly accomplished CTO Availment request form with Department Head's signature	2.1 Check submitted documents, process and forward to the CHRM Officer or authorized personnel for review and signature	None	1 working day	Gemma G. Carpon Administrative Aide I City Human Resource Management Office
	2.2 Review and sign request	None	1 working day	Judith S. Guevarra City Human Resource Management Officer Carmina C. Lim Administrative Assistant II City Human Resource Management Office
	2.3 Record to logbook and forward to the City Administrator's Office for approval	None	5 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III



					City Human Resource Management Office
	2.4	Review and approve	None	1 working day	Pia S. Ramirez-Delos Santos City Administrator City Administrator's Office
	2.5	Record to logbook and forward to the City Human Resource Management Office	None	5 minutes	Jennifer S. Mendoza Administrative Assistant I City Administrator's Office
Receive employee's copy and sign on the logbook	2.6	Record to logbook and release employee's copy to concerned offices	None	1 hour	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
		Total	None	3 days, 1 hour and 20 minutes	



5. APPLICATION FOR LEAVE OF ABSENCE / MONETIZATION

Leave of Absence is a right granted to officials and employees not to report for work with or without pay as may be provided by law and as the rules prescribed in Rule XVI of Executive Order No. 292.

Application for leave of absence may be filed by the officials and employees of the City Government of Meycauayan with permanent, temporary, coterminous, contractual & casual status of appointment including elected officials.

Monetization refers to payment in advance under prescribed limits and subject to specified terms and conditions of the money value of leave credits of an employee upon his request without actually going on leave.

Officials and employees whether elective, permanent, co-terminous, temporary, contractual or casual, who have accumulated fifteen (15) days of vacation leave credits shall be allowed to monetize a minimum of ten (10) days, provided, that at least five (5) days is retained after monetization and provided further that a maximum of thirty (30) days may be monetized in a given year.

Monetization of fifty percent (50%) of all the accumulated leave credits may be allowed for valid and justifiable reasons subject to the discretion of the City Mayor and the availability of funds, such as:

- a. Health, medical and hospital needs of the employee and the immediate members of his family
- b. Financial aid and assistance brought about by force majeure events such as calamities, typhoons, fire, earthquake and accidents that affect the life, limb and property of the employee and his/her immediate family
- c. Educational needs of the employee and the immediate members of his/her family
- d. Payment of mortgages and loans which were entered into for the benefit or which inured to the benefit of the employee and his/her immediate family
- e. In cases of extreme financial needs of the employee or his/her immediate family where the present sources of income are enough to fulfill basic needs such as food, shelter and clothing



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Office or Division:	City Human Resource Ma	anagement Office
Classification:	Complex	
Type of Transaction:	G2G - Government to Go	overnment
Who may avail:	Incumbent Officials and	Employees of the City Government of Meycauayan
		permanent, temporary, contractual, casual status of
	appointment)	F
CHECKLIST OF I	, ,	WHERE TO SECURE
Duly Accomplished		City Human Resource Management Office, 5 th Floor
	No. 6 Revised 2020) - 1	Sky Haman Rossards Management Smoo, 8 1 1861
	ocopies/duplicate copies	
Additional Requirement		
For Sick Leave Applicat		
	(if filed in advance to	Attending Physician
	cedure or advised to rest	Attending i mysician
	ork is more than five (5)	
days) – 1 original cop	· ,	
	davit (in case medical	Notary Public
	availed of) - 1 original	,
copy & 1 photocopy	, i j	
For Special Emerger	ncy (Calamity) Leave	
Application:		
_	ouse or been stranded in	To be provided by the employee
	ginal copy &1 photocopy	
	if disease/illness of	Attending Physician
	g of immediate family	
	rought by natural	
· · · · · · · · · · · · · · · · · · ·	1 original copy & 1	
photocopy		
For Solo Parent Leave A	Application:	
	Identification Card – 1	City Social Welfare and Development Office, 2 nd Floor
certified true copy & 1		Oity Godiai Wellare and Development Office, 2 1 1001
		Local / City Civil Registrar
true copy & 1 photoco		Loodi / City Olvii Nogiotidi
	child/children is sick – 1	Attending Physician
original copy & 1 phot		- · · · · · · · · · · · · · · · · · · ·
	17	
For Maternity Leave App	olication:	
1. Written Notice to the		To be provided by the employee
	ernity leave at least thirty	
	, specifying the effectivity	
_	al copy & 1 photocopy	
2. Proof of pregnancy		Attending Physician
-	ected delivery date) - 1	
original copy & 1 phot	осору	
		City Social Welfare and Development Office, 2 nd Floor



 Valid Solo Parent Identification Card (for qualified female solo parent) – 1 certified true copy & 1 photocopy

For Extended Maternity Leave Application:

 Written Notice to the City Mayor at least fortyfive (45) days before the end of the maternity leave – 1 original copy & 1 photocopy

For Allocation of Maternity Leave Credits:

- Notice of Allocation of Maternity Leave Form (CS Form No. 6a, series of 2020), if maximum of seven (7) days from the 105-day maternity leave will be allocated to the child's father/alternate caregiver) – 1 original copy & 1 photocopy
- 2. Proof of Relationship
 - Marriage Certificate (for the child's father)
 1 certified true copy & 1 photocopy
 - Certificate of Live Birth (for alternate caregiver who may be a relative of the employee sharing the same household) – 1 certified true copy & 1 photocopy
 - Barangay Certificate stating that current partner or alternate caregiver is sharing the same household – 1 original copy & 1 photocopy
- 3. In the event the female employee dies or is permanently incapacitated:
 - Death Certificate 1 certified true copy & 1 photocopy
 - Medical Certificate or Abstract 1 original copy & 1 photocopy

For Paternity Leave Application:

- Marriage Certificate 1 certified true copy & 1 photocopy
- Birth Certificate of the newborn child 1 certified true copy & 1 photocopy
- Medical Certificate with pathology report in case of miscarriage showing the actual date of delivery – 1 original copy & 1 photocopy

For Adoption Leave Application:

 Pre-Adoptive Placement Authority, if leave will be availed of before the grant of petition for adoption – 1 authenticated copy & 1 photocopy To be provided by the employee

City Human Resource Management Office, 5th Floor

Local / City Civil Registrar

Local / City Civil Registrar

Barangay Hall, where the employee resides

Local / City Civil Registrar

Attending Physician

Local / City Civil Registrar

Local / City Civil Registrar

Attending Physician or Midwife

Department of Social Welfare and Development (DSWD)

Proper Court



 Decree of Adoption, if leave is availed after the grant of the petition for adoption – 1 authenticated copy & 1 photocopy

Attending Physician

For Special Leave Benefits for Women Application:

- Medical Certificate reflecting the gynecological disorder, histopathological report, operative technique used for the surgery, the duration of the surgery including the peri-operative period (period of confinement around surgery) and estimated period of recuperation of the employee – 1 original copy & 1 photocopy
- Medical Certificate reflecting that the female employee is physically fit to assume the duties of her position, upon the employee's return to work – 1 original copy & 1 photocopy

For VAWC Leave Application:

Barangay Protection Order (BPO - 1 original copy & 1 photocopy or

Temporary/Permanent Protection Order (TPO/PPO) – 1 original copy & 1 photocopy or

Certification that the application for the BPO/TPO/PPO has been filed, if the protection order is not yet issued by the barangay or the court – 1 original copy & 1 photocopy or

Police Report specifying the details of the occurrence of violence on the victim, in the absence of the BPO/TPO/PPO or the Certification from Barangay – 1 original copy & 1 photocopy

Medical Certificate – 1 original copy & 1 photocopy

For Study Leave Application:

- Bachelor's degree diploma 1 certified true copy & 1 photocopy
- Application form for taking the bar or board examinations – 2 photocopies or

Registration Certificate, for completing the Master's Degree – 2 photocopies

Attending Physician

Barangay Hall where the application for protection order has been filed

Trial Court where the application for TPO/PPO has been filed

Barangay Captain/Councilor or Prosecutor or the Clerk of Court where the BPO/TPO/PPO has been filed

Philippine National Police (PNP)

Attending Physician

Registrar's Office of the School attended

Supreme Court or Professional Regulation Commission

Registrar's Office of the School Attended

To be provided by the employee

Barangay Hall or Philippine National Philippine (PNP)



For Rehabilitation Privilege/Leave Application:

- Letter addressed to the City Mayor 1 original copy & 1 photocopy
- Barangay or Police Report 1 original copy & 1 photocopy
- Medical Certificate on the nature of the injuries, the course of treatment involved and the need to undergo rest, recuperation and rehabilitation – 1 original copy & 1 photocopy
- Written concurrence of a government physician for recommendation of rehabilitation, if the attending physician is a private practitioner, particularly on the duration of the period of rehabilitation – 1 original copy & 1 photocopy

For application of absences due to Quarantine and/or Treatment of COVID-19:

- Certificate, indicating that the employee has submitted himself/herself for monitoring/investigation, as applicable (for close contact) – 1 original copy & 1 photocopy
- Quarantine Certificate 1 original copy & 1 photocopy
- Medical Certificate, indicating that the employee is cleared to report back to work – 1 original copy & 1 photocopy
- Medical Records showing that the employee was treated of the COVID-19 (for those under treatment) – 1 original copy & 1 photocopy
- Reverse Transcription Polymerase Chain Reaction (RT-PCR) Test Result (for infected or identified as close contact of a suspect, probable and/or confirmed case while in the performance of official functions) – 2 photocopies
- Vaccination Card (for those fully vaccinated) –
 2 photocopies
- Barangay Contact Tracing form (for those infected or identified as close contact or a suspect, probable and/or confirmed case due to personal activities) 1 original copy & 1 photocopy

For application of absences due to COVID-19 Vaccination and/or Adverse Events following Immunization of COVID-19 Vaccine:

1. Immunization / Vaccination Card, with indicated information on the local vaccination operations center or vaccination site – 2 photocopies

Attending Physician

Government Physician

Government / Private Physician

Local Quarantine / Health Official

Government / Private Physician

Government / Private Physician

Laboratory where test was done

To be provided by the employee

Barangay Hall where the employee resides

Vaccination Operations Center or Vaccination Site

Attending Physician



- Medical Certificate and/or clinical abstract indicating the diagnosis, management done and number of days of recuperation needed with physicians contact information (for serious AEFIs) – 1 original copy & 1 photocopy
- Medical Certificate indicating that the employee underwent observation due to AEFI (for nonserious or minor AEFIs) – 1 original copy & 1 photocopy

For leave application of more than thirty (30) days:

- Duly Accomplished Clearance Form (CS Form No. 7 Revised 2018) – 3 originally signed copies
- Duly Accomplished Hand-Over Form 1 original copy & 2 photocopies
- Medical Certificate, if for medical reason 1 original copy & 1 photocopy

For leave application when travelling abroad:

- a. Unofficial Trip of Less than three (3) months and no emergency or crisis
 - Request Letter to the Local Chief Executive stating the employee's full name, position title/designation, country or destination, duration and purpose of travel – 1 original copy
 - Duly Notarized Affidavit attesting that no administrative charge or criminal case has been filed or is pending against the applicant – 1 original copy
 - 3. Oath of Undertaking, when the applicant has a pending case 1 original copy
 - Medical Certificate, if for medical reason 1 original copy
 - 5. Foreign Travel Authority (FTA) 1 copy

b. Unofficial Trip of More than three (3) months and during periods of emergency or crisis

- Request Letter to the Local Chief Executive stating the employee's full name, position title/designation, country or destination, duration and purpose of travel – 1 original copy & 2 photocopies/duplicate copies
- 2. Duly Notarized Affidavit attesting that no administrative charge or criminal case has

Physician at the vaccination center or medical facility

City Human Resource Management Office, 5th Floor

City Human Resource Management Office, 5th Floor

Attending Physician

To be provided by the employee

Notary Public

Notary Public

Attending Physician

City Mayor (for all officials and employees) Provincial Governor (if applicant is City Mayor)

To be provided by the employee

Notary Public



been filed or is pending against the applicant – 1 original copy & 2 photocopies or

3. Oath of Undertaking, when the applicant has a pending case – 1 original copy & 2 photocopies

4. Medical Certificate, if for medical reason – 1 original copy & 2 photocopies

5. Citizen's Charter Service Request Form – 2 original copies

6. Foreign Travel Authority (FTA) - 2 copies

Notary Public

Attending Physician

City Human Resource Management Office, 5th Floor Or download at www.fta.dilg.gov.ph

Secretary of the Interior and Local Government (SILG)

	CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.	Encode details of leave in the computer database and receive leave application form.	Assist the employee in encoding details of leave and issue leave application form.	None	10 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
2.	Submit the duly accomplished leave form and attached all required documents.	2.1 Check submitted documents and forward to leave processor.	None	5 minutes	Ferdinand SJ. Rafols Driver / Support Staff Federic E. Montes Administrative Aide III City Human Resource Management Office
		2.2 Process and forward to the City Human Resource Management Officer or authorized personnel for checking and signature.	None	4 hours	Gemma G. Carpon Administrative Aide I City Human Resource Management Office
		2.3 Check and sign	None	1 working day	Judith S. Guevarra City Human Resource Management Officer Carmina C. Lim Administrative Assistant II City Human Resource Management Office



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	2.4	Record to logbook and forward to the City	None	15 minutes	Ferdinand SJ. Rafols Driver / Support Staff
		Administrator for initial.			Federic E. Montes Administrative Aide III
					Gemma G. Carpon Administrative Aide I
					City Human Resource Management Office
	2.5	Review and initial	None	1 working day	Pia S. Ramirez-Delos Santos City Administrator
					City Administrator's Office
	2.6	Record to logbook and forward to the City Mayor's Office for approval	None	30 minutes	Jennifer S. Mendoza Administrative Assistant I
					City Administrator's Office
	2.7	Approve leave application	None	1 working day	Atty. Henry R. Villarica City Mayor
					City Mayor's Office
	2.8	Record to logbook and forward to the City Human Resource Management Office	None	30 minutes	Hershey B. Hong Justine Nicole M. Trinidad Administrative Aide I
					City Mayor's Office
3. Receive employee's copy	3.	Record to logbook and release employee's	None	1 hour	Ferdinand SJ. Rafols Driver / Support Staff
		copy to concerned offices			Federic E. Montes Administrative Aide III
					City Human Resource Management Office
		Total	None	4 days and 7 hours	<u> </u>