

**CS Form No. 33-A**  
Revised 2018

(Stamp of Date of Receipt)

**Republic of the Philippines**  
**UNIVERSITY OF THE PHILIPPINES MANILA**  
*The Health Sciences Center*

**Mr/s.**

Employee No.:

You are hereby appointed as \_\_\_\_\_ (SG/JG/PG \_\_\_\_\_ Step \_\_\_\_\_ )  
(Position Title)

under \_\_\_\_\_ status at the \_\_\_\_\_  
(Permanent, Temporary, etc.) (Office/Department/Unit)

with a compensation rate of \_\_\_\_\_ (P \_\_\_\_\_ )  
pesos per month.

The nature of this appointment is \_\_\_\_\_ vice \_\_\_\_\_  
, who \_\_\_\_\_ With Plantilla Item No. \_\_\_\_\_  
(Transferred, Retired, etc.)

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

Very truly yours,

\_\_\_\_\_

**Chancellor**  
**Appointing Officer/Authority**

\_\_\_\_\_  
Date of Signing

**CSC ACTION:**



\_\_\_\_\_  
Date

Stamp of Date of Release

**Certification**

This is to certify that all requirements and supporting papers pursuant to CSC MC No. 24, s. 2017, as amended, have been complied with, reviewed and found to be in order.

The position was published at \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ,  
20 \_\_\_\_\_ and posted in \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ ,  
20 \_\_\_\_\_ in consonance with RA No. 7041. The assessment by the Human Resource Merit Promotion and Selection Board (HRMPSB) started on \_\_\_\_\_ , 20 \_\_\_\_\_ .

\_\_\_\_\_  
Director, HRDO

**Certification**

This is to certify that the appointee has been screened and found qualified by the majority of the HRMPSB/Placement Committee during the deliberation held on \_\_\_\_\_ :

\_\_\_\_\_  
Vice Chancellor for Administration  
Chairperson, HRMPSB/Placement Committee

**CSC Notation**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ANY ERASURE OR ALTERATION ON THE CSC ACTION SHALL NULLIFY OR INVALIDATE THIS APPOINTMENT EXCEPT IF THE ALTERATION WAS AUTHORIZED BY THE COMMISSION.

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