CS Form No. 7 Series of 2017

Agency Name CLEARANCE FORM

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TO: (Agency Name)			Date of Application		
I hereby apply for clearance from money, Purpose: Transfer Resign Li Retirement Effectivity/Inclusive Period:	nation	C Other	ated accountabilities for: Mode of Separation: e specify:		
Office of Assignment: Position/SG/Step:		Name and Signature of Employee			
I CLEARANCE FROM WORK-RELATED ACCO	UNTABILI	TIES	Hume and eighted of Employ		
We hereby certify that this applicant is cleare				ept.	
Immediate Supervisor			Head of Office		
Name of Unit/Office/Department	Cleared	Not	Name of Clearing Officer/Official	Signature	
MA CONTRACTOR NO PERSONAL AND A CONTRACTOR					
Supply and Property Procurement and a. Management Services					
b. Human Resource Welfare & Assistance					
c. Agency-accredited Union/Cooperative					
a. Legal Office Library					
b. Library Services 3. Sidense and Assets Management					
a. Financial Services					
b. Transaction, Processing & Billing Services c. Payroll & Remittance Services					
Payou a Remitance Services Processing and Institutional Development					
a. Scholarship Services					
IV CERTIFICATION OF NO PENDING ADMINIST	RATIVE CA	SE:	· · · · · · · · · · · · · · · · · · ·		
a. Internal Affairs Office/Legal Affairs Office					
with pending administrative case with ongoing investigation (no for	mal charge ye	ət)			
V CERTIFICATION	innindige, constituente				
Signature over	er Printed Na	ime of Age	ency Head	4	
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Page 1 of 2

INSTRUCTIONS:

- 1. Employees who are retiring, being separated, transferring to other agencies, leaving the Philippines and going on maternity leave of absence shall prepare this form in quadruplicate.
- 2. This clearance should be duly accomplished before paying the last salary or any money due the employees. (Specify which type of clearance: maternity leave, retirement, transfer, etc.)
- 3. If the employees are cleared from a unit/office/department, the clearing/authorized official may attach to this clearance the pertinent document/s that shall prove that the employees are cleared of any obligation or accountability from their office, if any, and tick the box under the "Cleared" column before affixing their signatures.
- 4. If the employees appear to have uncleared accountability/ies from a unit/office/department, the clearing/authorized official shall attach to this clearance the pertinent document/s that shall prove that the employees have remaining obligation or accountability from their office further indicating the necessary action/s that the employee must satisfy in order to be cleared, and tick the box under the "Uncleared" column. The clearing/authorized official must only sign this clearance corresponding to their name once the employee have complied the necessary requirements and cleared of all the obligation/s and accountability/ies from their office. They must also tick the box under the "Cleared" column.
- 5. The HRMO shall distribute copies of approved clearance as follows: original to the employee; duplicate to be attached to the payroll or voucher; triplicate to human resource unit file; and fourth copy to accounting/auditing office.
- 6. Processing of clearance certificate shall follow the order of number indicated