



REQUEST FOR INFORMATION/RECORD

Date: 03/22/22

Name of Requestor: Myrna Rissa C. Almonite

Address: Brgy. Patag Baybay City

Contact Number: 09095032256 / 1030

E-mail address: myrnaalmonite@vsu.edu.ph

Proof of Identity: PRC ID

ID No.: 1716489

Requested Information:

Certificate of Employment

No. of copies: 4

Reason & intended use of requested information/document

Ranking in DBPED (requirements)

MYRNA RISSA C. ALMONITE

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0610474 Date: 3/22/22 Amount: 401

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: