



REQUEST FOR INFORMATION/RECORD

Date: 2 June 2022

Name of Requestor: Mark Ratilla
Address: DBM, VSU, Baybay City, Leyte
Contact Number: 0916 775 2780 E-mail address: ratil mark.ratilla@vsu.edu.ph
Proof of Identity: VSU ID ID No.: V000838
Requested Information: Certificate of Employment (applicant's position, date hired, compensation, office address, and HR contact number).

No. of copies: 1

Reason & intended use of requested information/document

visa application


MARK RATILCA

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. _____ Date: _____ Amount: _____

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

