



REQUEST FOR INFORMATION/RECORD

Date: 5/11/22

Name of Requestor: Mary Bernadette J. Solis

Address: VSU Campus Visca Baybay City, Leyte

Contact Number: 0909 20 80236

E-mail address: remie.solis@vsu.edu.ph

Proof of Identity: VSU ID

ID No.: Y00436

Requested Information:

TOR, RLE Cert. + CXL

No. of copies: 1

Reason & intended use of requested information/document

NCLEx purpose

Remie Solis

Name & Signature of Requestor/Representative

Action on the request:

Approved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0612466 Date: 5/11/22 Amount: 275

Disapproved:

RYSAN C. GUINOCOR

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval: