



**REQUEST FOR INFORMATION/RECORD**

Date: 05-18-2022

Name of Requestor: Aliah C. Bacus & Chona A. Camarines

Address: ITEEM

Contact Number: 09199867505

E-mail address: camarineschona30@gmail.com

Proof of Identity: Student ID

ID No.: 18-1-00732 / 18-1-00221

Requested Information:

Number of Population (Students, Instructors, Staffs, etc)  
in Visayas State University

No. of copies: 2

Reason & intended use of requested information/document

Collect data as one of the needed information to complete the  
course requirements on Envi. 124, Ecol. 27, Envi. 118n

CHONA A. CAMARINES ALIAH C. BACUS  
Name & Signature of Requestor/Representative

**Action on the request:**

Approved:

**RYSAN C. GUINOCOR**

Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0612842 Date: 5/18/22 Amount: 20/-

Disapproved:

**RYSAN C. GUINOCOR**

Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

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