VISAYAS STATE UNIVERSITY
Visca, Baybay City, Leyte

TRAVEL REQUEST / ORDER
(For Faculty)

March 28, 2023
Date

Name : **FELIX M. SALAS**
Designation : Professor VI   Signature

Destination : Bureu of Corrections Abuyog, Leyte
Date of Travel : April 5, 2023
Purpose : To conduct Training on Urban Gardening and Aquaponic Agriculture

Total Expenses: _____
Source of Funds _____
Transportation: [ ] University Vehicle
[ ] Public Conveyance

Noted/Verified:

ELIZABETH S. QUEVEDO
Office Head/Immediate Supervisor

RECOMMENDING APPROVAL:

MA. THERESA P. LORETO
College Dean

N/A
In-charge of funds (If other than the Dept/Office Head)

MARIA JULIET C. CENIZA   BEATRIZ S. BELONIAS
VP for REI   VP for Academic Affairs

APPROVED:

EDGARDO E. TULIN
President

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CHECKLIST OF DOCUMENTS TO SUPPORT REQUEST TO GO ON TRAVEL (please check):

- [ ] Medical Clearance from the VSU Infirmary that the employee have no symptoms of Covid 19
- [ ] Invitation from the organizer of the activity/conference/ meeting (if applicable)
- [ ] Certification from the organizer that social distancing and other health/hygiene protocols against Covid 19 will be observed for the duration of the activity (if applicable)
- [ ] Quarantine passes issued by the destination LGU and if possible, together with passes from LGUs enroute to the destination
- [ ] Strong justification from the requesting party duly endorsed by the immediate supervisor on the necessity and urgency of the trip and commitment of the requesting party to religiously comply with health/hygiene protocols during the trip
- [ ] Waiver from the employee concerned that he/she is willing to undergo self quarantine for 14 days, while he/she will be on work from home scheme
- [ ] Approved list of outputs between supervisor and employee to be delivered/accomplished during his/her 14 days work from home scheme
- [ ] Clearance issued by the Nurse on duty 30 minutes prior to travel should be submitted to the guard on duty before allowing vehicle to go out of campus

Certified Correct:

FELIX M. SALAS
Name of Travelling Employee

Noted/verified except Clearance from Nurse :

_____
Name of Office Head/Supervisor