

VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

TRAVEL REQUEST / ORDER

(For Faculty)

April 22,	2022	
Dat	е	

Name	: ARTURO E. PASA
Designation	: Project Leader Signature
Destination	: Iloilo City
Date of Travel	: May 16-22,2022
Purpose	: I will be joining the John Dillon Fellowship
	Project base line data gathering in Iloilo
	City.
Total Expenses	9:
Source of Fund	
Transportation	
	[] Public Conveyance
Noted/Verifi	ied:
	ANATOLIO N. POLINAR
	Head, DFS
RECOMMEND	DING APPROVAL:
	DENNIS P.PEQUE
	College Dean
	ARTURO E. PASA
	In-charge of funds (if other than the
	Dept/Office Head)
	IET C. CENIZA / BEATRIZ S. BELONIAS
	- A Luis Affaire
	earch, Extension Vice Pres. For Academic Affairs
& In	ΠΟναυστί
ADDDOVE	D:
APPROVE	EDGARDO E. TULIN

President

VISAYA

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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: <u>ARTURO E. PASA</u> Name of Travelling Employee	

Noted/verified except Clearance from Nurse :

Name of Office Head/Supervisor