



REQUEST FOR INFORMATION/RECORD

Date: June 13, 2022

Name of Requestor: Jo Jane D. Atok

Address: Guadalupe, Baybay City

Contact Number: 09672874451

E-mail address: jojane.atok@vsu.edu.ph

Proof of Identity: VSU ID

ID No.: VO1206

Requested Information:

Certificate of employment

No. of copies: 3

Reason & intended use of requested information/document

For graduate study / VISA application / Scholarship Requirement

JO JANE D. ATOK

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:

