

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

Date: <u>feb. 17, 2022</u>
Name of Requestor: Zyra May #- Centino
Address: DOE, VSU
Contact Number: 0922 208 266 E-mail address: zyramay. centino @ vs u. g Proof of Identity: Company 10 ID No.: VOUIS 3
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Sunmarized Teaching Performance Evaluation by Students (TPES) for the ff. 54: 2015-2016; 2016-2017; 2017-2018
No. of copies:1
Reason & intended use of requested information/document NBC Cycle 8
ZYRA MAY HOCENTIND Name & Signature of Requestor/Representative
Action on the request:
Approved:
RYSAN C. GUINOCOR Director, ODAS and FOI Decision Maker
Evidence of payment: OR No. 0 60 7798 Date: 2 17 22 Amount: 26/
Disapproved:
RYSAN C. GUINOCOR Director, ODAS and FOI Decision Maker
Remarks/reason for disapproval: