



REQUEST FOR INFORMATION/RECORD

Date: 18 Feb 2022

Name of Requestor: Maria Aurora T.W. Tabada

Address: GRC, VSU

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Proof of Identity: VSU ID

ID No.: V-00496

Requested Information:

Certification of Summary of TPES ratings (July 2016 - June 2019)

No. of copies: 1

Reason & intended use of requested information/document

For QCE purposes

Tabada

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: