

## **VISAYAS STATE UNIVERSITY**

Visca, Baybay City, Leyte



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Visca, Baybay City, Leyte

TO GO ON TRAVEL (please check):

## TRAVEL REQUEST / ORDER

February 2, 2023 Date

		Medical Clearance from the VSU Infirmary that the
		employee have no symptoms of Covid 19
Designation Destination: Date of Travel: Purpose:	REYNANTE G. MACAPANAS  SRA  Brgy. Anahawan, Bato, Leyte February 6, 2023  Site monitoring on vermicomposting facility	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
Total Expenses: Source of Funds		endorsed by the immediate supervisor on the
Transportation:	[ ] University Vehicle	necessity and urgency of the trip and commitment
Transportation.	[ ] Public Conveyance	of the requesting party to religiously comply with
	11. 22	health/hygiene protocols during the trip
Noted/Verified	JEROME O. ARRIBADO	Waiver from the employee concerned that he/sh/ willing to undergo self quarantine for 14 days while he/she will be on work from home sc/
	Office Head/Immediate Supervisor	Approved list of outputs between supervisor and
		employee to be delivered/accomplished during his/her
RECOMMENDING APPROVAL:		14 days work from home scheme
		Clearance issued by the Nurse on duty 30 minutes
	VD for Appelonic Affairs	prior to travel should be submitted to the guard on duty before allowing vehicle to go out of campus
	VP for Academic Affairs	duty before allowing vertice to go out or campus
	In-charge of funds ( If other than the	Certified Correct:
	Dept/Office Head)	DEVALANTE CARACADANAS
		REYNANTE G. MACAPANAS  Name of Travelling Employee
	MARIA JULIET C. CENIZA	Name of Travelling Employee
. :	VP for Research, Extension & Innovation	
		Noted/verified except Clearance from Nurse :
APPROVED:		
	EDGARDO E. TULIN	Name of Office Handlows I am
	President	Name of Office Head/Supervisor





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Visca, Baybay City, Leyte

## TRAVEL REQUEST / ORDER

February 2, 2023 Date

Name Designation	JOLLIVIE A. CURAY  SRA  (Signature			
	Brgy. Anahawan, Bato, Leyte			
	February 6, 2023			
Purpose :	Site monitoring on			
	vermicomposting facility			
Total Expenses:				
Source of Funds				
Transportation:	[ ] University Vehicle			
	[ ] Public Conveyance			
Noted/Verified:  JEROME O. ARRIBADO				
	Office Head/Immediate Supervisor			
RECOMMENDING APPROVAL:				
	VP for Academic Affairs			
	F			
	In-charge of funds ( If other than the			
	Dept/Office Head)			
	MARIA JULIET C. CENIZA  VP for Research, Extension & Innovation			
APPROVED:	EDGARDO E. TULIN			



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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/sh/
willing to undergo self quarantine for 14 days while he/she will be on work from home scr
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:
JOLLIVIE A. CURAY
Name of Travelling Employee
Noted/verified except Clearance from Nurse:
Name of Office Head/Supervisor