

## **VISAYAS STATE UNIVERSITY**

Visca, Baybay City, Leyte

## TRAVEL REQUEST / ORDER

October 27, 2022 Date

| Name   | JIMMY O. POGOSA                                |
|--|--|
| Designation  | : Study Leader Signature                       |
| Destination  | Brgy. Pinamanagan Abuyog Leyte                 |
| Date of Travel   | : November 2-11, 2022                          |
| Purpose •  | To construct bamboo scaffolding for            |
|  | phenological (flowering and fruiting) studies  |
|  | and measure leaf functional traits (leaf area, |
|  | leaf area index, and photosynthetic activity)  |
|  | of Aquilaria sp. For the ECo-SAP Project       |
| Total Expenses:  | Floject  |
| Source of Funds  | ECo-SAP  |
| Transportation:  | [ ] University Vehicle                         |
| The state of the s | [X ] Public Conveyance                         |
|  | [ ] Private Vehicle                            |
|  | [ ] Trivate verilicie                          |
| Noted/Verified   | d:   |
|  | ELIZA D. ESPINOSA                              |
|  | Office Head/Immediate Supervisor               |
|  | 10 27  |
| RECOMMENDIN  |  |
| LOCIVINIENDIN  | S APPROVAL:                                    |
|  | 51174  |
|  | ELIZA D. ESPINOSA                              |
|  | Department Head ולילום                         |
|  | V  |
|  |  |
|  | DENNIS P. PEQUE                                |
|  | College Dean                                   |
|  |  |
|  |  |
|  | JIMMY O. POGOSA                                |
|  | In-charge of funds (If other than the          |
|  | Dept/Office Head)                              |
|  |  |
| MARIA IIII IET   | 0.051151                                       |
| MARIA JULIET   | C. CENIZA BEATRIZ S. BELONIAS                  |
| P for Research   | 1. Extension VP for Academia Affairs           |

EDGARDO E. TULIN

President

APPROVED:

SANAS PROPERSION

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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:  |
| MANY OF THE STATE |
| Name of Travelling Employee   |
| The or value improyee   |
| Note diversified and all  |
| Noted/verified except Clearance from Nurse :  |
| k .   |
| ELIZA D. ESPINOSA   |
| Name of Office Head/Supervisor Ly   |