



REQUEST FOR INFORMATION/RECORD

Date: 06-15-22

Name of Requestor: CHRISTINE RAULIE M. DADULA

Address: VSU - IHS

Contact Number: 09363920118

E-mail address: dadulachritineraulie@gmail.com

Proof of Identity: PRC 1636676

ID No.: 1636676

Requested Information:

Certificate of Employment

No. of copies: 1

Reason & intended use of requested information/document

for promotion

CHRISTINE RAULIE M. DADULA

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: