



REQUEST FOR INFORMATION/RECORD

Date: APRIL 22, 2022

Name of Requestor: JOCELYN G. DACLAG

Address: Zone 19, Baybay City (DFST)

Contact Number: 09955240360

E-mail address: jocelyn.daclag@vsu.edu.ph

Proof of Identity: VSU ID

ID No.: V00804

Requested Information:

SERVICE RECORD

No. of copies: 1

Reason & intended use of requested information/document

Application for VSU Housing Unit

JOCELYN G. DACLAG / HENRY P. MODINA
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: