



**REQUEST FOR INFORMATION/RECORD**

Date: Jan 20, 2022

Name of Requestor: Aga V. Alianza

Address: Brgy. Guadalupe Baybay City Leyte

Contact Number: 0909-128-9507

E-mail address: aga.alianza@vsu.edu.ph

Proof of Identity: driver's license

ID No.: #12-18-000478

Requested Information:

Request for certificate of employment

No. of copies: 1

Reason & intended use of requested information/document

for apply for promotion

for AGA V. ALIANZA  
Signature of Requestor/Representative

**Action on the request:**

Approved:

**RYSAN C. GUINOCOR**  
Director, ODAS and FOI Decision Maker

Evidence of payment: OR No. 0606492 Date: 21 Jan. 2022 Amount: ₱ 10

Disapproved:

**RYSAN C. GUINOCOR**  
Director, ODAS and FOI Decision Maker

Remarks/reason for disapproval:

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