

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

			Date:	6/30/2022	
Name of Requestor:	POCA	JOE DIDAL			
Address:	VSY	(ODQA)		0	1
Contact Number:	0915 0	48 9270	E-mail address:	de didal &	vsu. edu.ph
Proof of Identity:	PSA				
	of all emplo	yees in the type (regular	university with, carral, Job-orde	details v, etc).	-
No. of copies:					
Reason & intended us	it of a	ed information/do probabilistic n generalizing	sampling method	u a min	- - -
POCA POE	PIDAL				
Name & Signature of	Requestor/Re	epresentative			
Action on the reque	st:				
Approved:					
		RYSAN C. GUIN ODAS and FOI			
Evidence of payment	:: OR No	warred [Date: Amo	ount:	
Disapproved:					
		RYSAN C. GUIN ODAS and FOI			
Remarks/reason for	disapproval:				*

No.