

OFFICE OF THE HEAD OF RECORDS AND ARCHIVES

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REQUEST FOR INFORMATION/RECORD

	Date: 2/24/2422
Name of Requestor: Mulm M. Jambis	<i>J I</i> ,
Address: My. 32 Kilburne St., VSU, Baylon Cit,	V
Contact Nos.: 9397209796	E-mail address: mmtanbise vurgdu
Proof of Identity: VSV ID	ID No.: <u>V0779</u>
Requested Information:	
Certification on the Summary of July 2016 - June 2019.	tres Rahing from
No. of copies:	
Reason & intended use of requested information/doc	ument
Qualifytive Critica for Exclusion (OCE) a Faculty
MAR LON M. TAMBIS	
Signature of Requestor/Representative	
Action on the request:	
Approved:	
RYSAN C. GUINO Director. ODAS and FOI D	
Evidence of payment: OR No Da	te: 21/Feb/wn Amount: 25.00
Disapproved:	
RYSAN C. GUINO Director. ODAS and FOI D	
Remarks/reason for disapproval:	