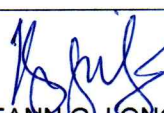





ARRANGEMENT FOR CLASS(ES) MISSED

(To be attached to Application for Leave Form and/or Travel Order/Request)

Name of Faculty		Department		Date of Filing
KLEER JEANN G. LONGATANG		ITEEM		April 29, 2022
Subject(s) Taught	Class Schedule	No. of Students	Arrangement for classes missed/ to be missed	
Enviro	10-12 MW	28	lecture materials are posted in the USUE.	
Reason(s) of: a. Leave: Date(s) _____ ___ Vacation ___ Sick ___ others (Pls. specify) _____		b. Travel: Date(s) <u>May 2, 2022</u>		
Conforme: _____ Name & Signature of person taking over the classes(s)		Prepared by:  <u>KLEER JEANN G. LONGATANG</u> Name & Signature of Instructor/Professor		
Approved by:  <u>ELIZA D. ESPINOSA</u> Name & Signature of Immediate Supervisor Date: <u>April 29, 2022</u>				

*to be accomplished in 2 copies



VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

TRAVEL REQUEST / ORDER

(For Faculty)

April 29, 2022

Date

Name : **KLEER JEANN G. LONGATANG**
Designation : **Instructor I**
Destination : **Cabucgayan, Biliran**
Date of Travel : **May 2, 2022**
Purpose :

[Signature]
Signature

To visit Rainforestation farms in connection with the VSU and KALAHI-CIDSS project.

Total Expenses: _____
Source of Funds: _____
Transportation: [] University Vehicle
[] Public Conveyance
[] Private Vehicle

Noted/Verified: *[Signature]*
ELIZA D. ESPINOSA
Office Head/Immediate Supervisor

RECOMMENDING APPROVAL: *[Signature]*
ELIZA D. ESPINOSA
Department Head
[Signature]
DENNIS P. PEQUE
College Dean

In-charge of funds (If other than the Dept/Office Head)

MARIA JULIET C. CENIZA
VP for Research, Extension & Innovation

BEATRIZ S. BELONIAS
VP for Academic Affairs

Approved: *[Signature]*
EDGARDO E. TULIN
President



VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

CHECKLIST OF DOCUMENTS TO SUPPORT REQUEST TO GO ON TRAVEL (please check):

- ☐ Medical Clearance from the VSU Infirmary that the employee have no symptoms of Covid 19
- ☐ Invitation from the organizer of the activity/conference/meeting (if applicable)
- ☐ Certification from the organizer that social distancing and other health/hygiene protocols against Covid 19 will be observed for the duration of the activity (if applicable)
- ☐ Quarantine passes issued by the destination LGU and if possible, together with passes from LGUs enroute to the destination
- ☐ Strong justification from the requesting party duly endorsed by the immediate supervisor on the necessity and urgency of the trip and commitment of the requesting party to religiously comply with health/hygiene protocols during the trip
- ☐ Waiver from the employee concerned that he/she is willing to undergo self quarantine for 14 days, while he/she will be on work from home scheme
- ☐ Approved list of outputs between supervisor and employee to be delivered/accomplished during his/her 14 days work from home scheme
- ☐ Clearance issued by the Nurse on duty 30 minutes prior to travel should be submitted to the guard on duty before allowing vehicle to go out of campus

Certified Correct: *[Signature]*

KLEER JEANN G. LONGATANG
Name of Travelling Employee

Noted/verified except Clearance from Nurse :

[Signature]
ELIZA D. ESPINOSA
Name of Office Head/Supervisor