



VISAYAS STATE UNIVERSITY

Visca, Baybay City, Leyte

TRAVEL REQUEST / ORDER (For Faculty)

May 16, 2022
Date

Name : **ENGR. JUNDY R. CASTIL**
 Designation : **DEPARTMENT HEAD**
 Destination : **Southern Leyte State University**
 Date of Travel : **MAY 17-18, 2022**
 Purpose : **External evaluator for SLSU RDEI Proposals**

Signature

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

Noted/Verified:

[Signature]
JANNET C. BENCURE
 Office Head/Immediate Supervisor

RECOMMENDING APPROVAL:

[Signature]
JANNET C. BENCURE
 College Dean

N/A

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

N.A.

MARIA JULIET C. CENIZA / **BEATRIZ S. BELONIAS**
 VP for Research & Extension Vice Pres. For Academic
 Affairs

APPROVED:

[Signature]
EDGARDO E. TULIN
 President



Word by:

Dr. Edwin Yu

[Signature]
SARAH AURORA W. TABADA, M.D.
 Medical Officer III
 License No. **0033 K**



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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]
JUNDY R. CASTIL
 Name of Travelling Employee

Noted/verified except Clearance from Nurse :

[Signature]
JANNET C. BENCURE
 Name of Office Head/Supervisor