

ANNEX A



Control No. 0100

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

FILE NO. 024.0342  
DATE 15 FEB 2024  
BY: [Signature]  
RECORD SECTION

**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental

<b>Name</b>	<b>FARREN LEIGH Y. HABABAG, RN</b>
<b>Position/Designation</b>	<b>NURSE II</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	render health services to T&NT personnel, conduct health assessment among learners
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	February 13, 2024
<b>Venue/Destination</b>	Sumaliring HS
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

For:   
**FARREN LEIGH Y. HABABAG, RN**  
Name and Signature of Requesting Employee

February 13, 2024  
Date

This is to certify that the trip of the requesting employee satisfies all the minimum conditions for authorized official travel and that alternatives to travel are insufficient for purposes stated herein.

**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

FEB 13 2024  
Date

**APPROVED:**

By the authority of the Schools Division Superintendent

**ROMEL VICTOR A. VILLAHERMOSA MBA**  
OIC-Asst. Schools Division Superintendent  
Office-In-Charge

[Signature]  
Date:

ANNEX A



Control No. 0106

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

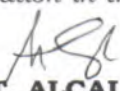


**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental


<b>Name</b>	<b>MARILYN T. ALCALA, DMD</b>
<b>Position/Designation</b>	<b>DENTIST II</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To render dental services to Bacong CES
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	February 14, 16, 28 & 29, 2024
<b>Venue/Destination</b>	Bacong District
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

  
**MARILYN T. ALCALA, DMD**  
Name and Signature of Requesting Employee

February 13, 2024  
Date

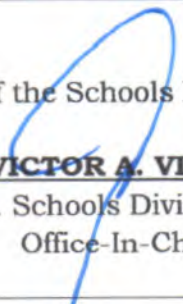
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**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

FEB 13 2024  
Date

**APPROVED:**

By the authority of the Schools Division Superintendent

  
**ROMEL VICTOR A. VILLAHERMOSA MBA**  
OIC-Asst. Schools Division Superintendent  
Office-In-Charge

2/13/2024  
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Republic of the Philippines  
Department of Education

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BY: G  
RECORD SECTION

**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental


<b>Name</b>	<b>ESTER I. NUEZ</b>
<b>Position/Designation</b>	<b>NURSE II</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To render health services and distribute eyeglasses to selected learners
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	February 21, 2024- Libertad Ong Calderon MES February 22, 2024 - Magsaysay MES February 28-29, 2024- Libertad Ong Calderon MES
<b>Venue/Destination</b>	Sibulan District 2
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

  
**ESTER I. NUEZ, RN, RMT, MPH**  
Name and Signature of Requesting Employee

February 13, 2024  
Date

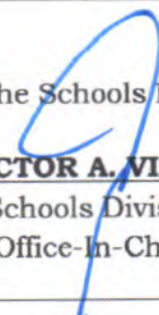
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**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

FEB 13 2024  
Date

**APPROVED:**

By the authority of the Schools Division Superintendent

  
**ROMEL VICTOR A. VILLAHERMOSA MBA**  
OIC-Asst. Schools Division Superintendent  
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**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

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RECORD SECTION

**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental


<b>Name</b>	<b>FELIX III D. MOSQUEDA, RN</b>
<b>Position/Designation</b>	<b>Nurse - II</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To monitor the implementation of the 2024 School Based Feeding Program.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	February 14, 2024
<b>Venue/Destination</b>	Sta. Catalina Districts 3 & 4
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

  
**FELIX III D. MOSQUEDA**  
Name and Signature of Requesting Employee

February 13, 2024  
Date

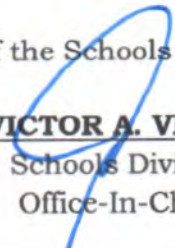
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**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

FEB 13 2024  
Date

**APPROVED:**

By the authority of the Schools Division Superintendent

  
**ROMEL VICTOR A. VILLAHERMOSA MBA**  
OIC-Asst. Schools Division Superintendent  
Office-In-Charge

2/13/24  
Date:

ANNEX A



Control No. 0109

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

FILED  
NO. 024.0342  
DATE 15 FEB 2024  
BY: [Signature]  
RECORD SECTION

**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental

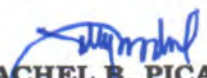
<b>Name</b>	<b>KARINA LOUISE B. DE LA CRUZ</b>
<b>Position/Designation</b>	<b>Medical Officer III</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Health certification of students for work immersion and athletes' check up for NORAA.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	February 14, 2024
<b>Venue/Destination</b>	Negros Oriental High School (NOHS)
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

  
**KARINA LOUISE B. DE LA CRUZ**  
Name and Signature of Requesting Employee

February 13, 2024  
Date

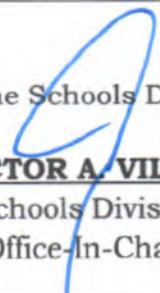
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**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

FEB 13 2024  
Date

**APPROVED:**

By the authority of the Schools Division Superintendent

  
**ROMEL VICTOR A. VILLAHERMOSA MBA**  
OIC-Asst. Schools Division Superintendent  
Office-In-Charge

  
Date:

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**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

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BY [Signature]  
RECORD SECTION

**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental

<b>Name</b>	<b>MARK ANTHONY PAJUELAS, RN</b>
<b>Position/Designation</b>	<b>NURSE II</b>
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render health services to T&NT Personnel, Conduct health assessment among learners.
<b>Host of Activity</b>	Division Office, School Health Section
<b>Period Covered (Inclusive of Travel Time)</b>	February 13, 2024
<b>Venue/Destination</b>	Sta. Catalina III District
<b>Fund Source</b>	Division MOOE

I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.

**MARK ANTHONY PAJUELAS, RN**  
Name and Signature of Requesting Employee

February 12, 2024  
Date

This is to certify that the trip of the requesting employee satisfies all the minimum conditions for authorized official travel and that alternatives to travel are insufficient for purposes stated herein.

**RACHEL B. PICARDAL, EdD**  
Chief Education Supervisor, SGOD  
Name and Signature of Recommending Authority

2/14/2024  
Date

**Approved By:**  
**NERI C. OJASTRO, EdD., CESO V**  
Schools Division Superintendent  
Name and Signature of Approving Authority

2/14/24  
Date:

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**REGION:** VII- Central Visayas

**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental

<b>Name</b>	<b>ANA MAE C. FESARIT, RN</b>
<b>Position/Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To conduct nursing health services to teaching/non-teaching personnel and school learners. Attend trainings and seminar.
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	February 16, 2024- San Jose ES 20 and 23, 2024- Tampocon ES
<b>Venue</b>	Ayungon I and Manjuyod I District and Dumaguete City
<b>Fund Source</b>	MOOE
<i>I hereby attest the information in this form and in the supporting documents attached hereto are true and correct.</i>	
<b>ANA MAE C. FESARIT, RN</b> Name and Signature of Requesting Employee	February 12, 2024 Date
<i>This is to certify that the trip of the requesting employee satisfies all the minimum conditions for authorized official travel and that alternatives to travel are insufficient for purposes stated herein.</i>	
<b>RACHEL B. PICARDAL, Ed. D</b> Chief, Education Supervisor Name and Signature of Recommending Authority	2/12/2024 Date
<b>NERI C. OJASTRO, Ed.D, CESO V</b> Schools Division of Negros Oriental	2/14/24 Date