

ANNEX A



Control No. 0145

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

024-0475  
27 FEB 2024  
5

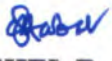
<b>Name</b>	<b>DR. KARINA LOUISE DE LA CRUZ, BRENT JOHN TRASMONTMARIANNE MAE M RAGAS, ANNA LEE CELIS, FELIX MOSQUEDA, ELIZABETH QUIRIT, MARIA NEHMIA BESARIO, JIMZU PATALAN, MARANATHA UDJAJI, JERRY M. CAMPOY, DR. NICANOR VILLAROSA, DR. MINDA REGALADO</b>
<b>Position/Designation</b>	MEDICAL OFFICER III, DENTIST II, RN & DENTAL AIDE
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render health services to T&NT Personnel, render oral health and health assessment among athletes and coaches
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	February 27, 2024- Amlan and San Jose Districts
<b>Venue/Destination</b>	San Jose District and Amlan 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.*

  
**MARIANNE MAE M. RAGAS**  
Name and Signature of Requesting Employee

February 26, 2024  
Date

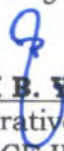
*This is to certify that the trip of the requesting employee satisfies all the minimum conditions for authorized official travel and that alternatives to travel are insufficient for purposes stated herein.*

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

\_\_\_\_\_  
Date

APPROVED:

*By the authority of the Schools Division Superintendent*

  
**LANI B. YURONG**  
Administrative Officer V  
OFFICE IN- CHARGE

2/26/24  
Date

ANNEX A



Control No. 0145

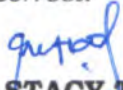

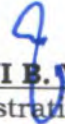
Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

RELEASED  
NO. 024-0473  
DATE 27 FEB 2024  
SECRET

**REGION:** VII- Central Visayas

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

<b>Name</b>	<b>GWYNNE STACY T. MONCIDA, 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.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	February 27, 2024 – Candugay HS February 29, 2024 – Siaton NHS
<b>Venue</b>	Siaton District 2
<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>	
<p style="text-align: center;"> <b>GWYNNE STACY T. MONCIDA, RN</b> Name and Signature of Requesting Employee</p> <p style="text-align: right;">February 26, 2024 Date</p>	
<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>	
<p style="text-align: center;"> <b>RACHEL B. PICARDAL, Ed. D</b> Chief, Education Supervisor</p> <p style="text-align: right;">_____ Date</p>	
<i>By the Authority of the Schools Division Superintendent</i>	
<p style="text-align: center;"> <b>LANI B. YURONG</b> Administrative Officer V Schools Division of Negros Oriental OFFICE - IN-CHARGE</p> <p style="text-align: right;">2/26/24 Date</p>	

ANNEX A



No.: 0/45

Republic of the Philippines  
Department of Education  
Schools Division of Negros Oriental

TRAVEL AUTHORITY FOR OFFICIAL TRAVEL

024-0413  
27 FEB 2024

<b>Name</b>	<b>Suzette S. Onde, Melanie Mae Austero, Emilda Chiu, Ellen Mayagma, Brent John Trasmonte, Maria Lovelyn Mananquil, Esan Val Cabrera, Mark Lester Amolo, Melydith Baldado</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	Monitoring of SBFP (Milk and NFP) delivery in the Districts of Jimalalud
<b>Host of Activity</b>	SDO Negros Oriental
<b>Inclusive Dates</b>	February 27, 2024
<b>Destination</b>	Jimalalud 1 & 2
<b>Fund Source</b>	Division MOOE

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

*Mande*  
**SUZETTE S. ONDE and MELANIE MAE AUSTERO, RN**  
Name and Signature of Requesting Employee

**FEBRUARY 26, 2024**  
Date

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

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

\_\_\_\_\_  
Date

By Authority of the Schools Division Superintendent:

*Lani B. Yurong*  
**LANI B. YURONG**  
Administrative Officer V  
Office-In-Charge

*2/26/24*  
\_\_\_\_\_  
Date

ANNEX A

No.: 0195



Republic of the Philippines  
Department of Education  
Schools Division of Negros Oriental

RELEASED  
NO 024-0413  
DATE 27 FEB 2024  
6  
SECTION

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

<b>Name</b>	<b>Esan Val T. Cabrera, Maria Lovelyn Mananquil</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To conduct physical examination of athletes for NORAA. SBFP monitoring
<b>Host of Activity</b>	SDO Negros Oriental
<b>Inclusive Dates</b>	February 27, 2024- Bala-as ES February 28, 2024- Jimalalud CES February 29, 2024- Tayasan CES
<b>Destination</b>	Jimalalud District 2, Tayasan District 2
<b>Fund Source</b>	Division MOOE
<i>I hereby attest that the information in this form and in the supporting documents attached hereto are true and correct.</i>	
<p style="text-align: center;"><b>ESAN VAL T. CABRERA, RN</b> Name and Signature of Requesting Employee</p>	
<p style="text-align: right;"><b>FEBRUARY 26, 2024</b> Date</p>	
<i>This is to certify that the trip of the requesting employee satisfies all minimum conditions for authorized official travel and that alternatives to travel are insufficient for purpose stated herein.</i>	
<p style="text-align: center;"><b>RACHEL B. PICARDAL EdD</b> Chief, Education Supervisor SGOD</p>	
<p>Name and Signature of Recommending Authority</p>	
<p style="text-align: right;">Date</p>	
Approved: By the Authority of the SDS	
<p style="text-align: center;"><b>LANI E. YURONG</b> ADMINISTRATIVE OFFICER V Office-In-Charge</p>	
<p style="text-align: right;"><u>2/26/24</u> Date</p>	

ANNEX A



Control No. 0145

Republic of the Philippines  
Department of Education

NO. 024-0442  
DATE 27 FEB 2024  
REGISTRATION SECTION

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

**REGION:** VII- Central Visayas

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

<b>Name</b>	<b>MARY RUTH GLORIA, CARMi ANN S. ALFORQUE</b>
<b>Position/Designation</b>	NURSE II
<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>	2/27/2024 – Elias RMMES 2/28-29/2024- Manalongon>NNLCS
<b>Venue/Destination</b>	SIATON III District , STA CATALINA DIST. 1
<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.

Mary Ruth C. Gloria, Carmi Ann Alforque RN

February 26, 2024

Name and Signature of Requesting Employee

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

Date

By the authority of the Schools Division Superintendent

LANI YURONG  
Administrative Officer V  
Office- In -Charge

2/26/24

Date