

ANNEX A



Control No. 0197

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

RELEASED FOR  
NO. 024.071  
DATE 19 MAR 2024  
SECTION

**REGION:** VII- Central Visayas

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

<b>Name:</b>	<b><u>DR. NIÑA HYACINTH P. HERRERA</u></b> <b><u>DR. MELCHORA DIOSDADA G. ASDILLO</u></b> <b><u>RUNI JOHN TERO</u></b>
<b>Position/Designation</b>	DENTIST II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	TO RENDER ORAL HEALTH SERVICES AMONG LEARNERS, NON-TEACHING AND TEACHING PERSONNEL.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	APRIL 2, 2024 (STA. CATALINA CENTRAL E/S) APRIL 3, 2024 (MANALONGON NICOLAS N LAJOT CENTRAL SCHOOL)
	STA. CATALINA 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.

**NIÑA HYACINTH P. HERRERA**  
Name and Signature of Requesting Employee

**MARCH 14, 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

**3/15/2024**  
Date

Approved by:

**NERI C. OJASTRO EdD, CESO V**  
Schools Division Superintendent  
Schools Division of Negros Oriental

**3/18/24**  
Date

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SECTION

**REGION:** VII- Central Visayas

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

<b>Name:</b>	<b>DR. NIÑA HYACINTH P. HERRERA</b>
<b>Position/Designation</b>	DENTIST II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	TO RENDER ORAL HEALTH SERVICES AMONG LEARNERS, NON-TEACHING AND TEACHING PERSONNEL.
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	APRIL 2,10,12,16,17,23,24,26 & 30,2024 (STA. CATALINA CENTRAL E/S) APRIL 3,19, 2024 (MANALONGON NICOLAS N LAJOT CENTRAL SCHOOL)
	STA. CATALINA DISTRICT
<b>Fund Source</b>	DIVISION MOOE

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**NIÑA HYACINTH P. HERRERA**

**MARCH 14, 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**

3/15/2024

Chief Education Supervisor, SGOD

Name and Signature of Recommending Authority

Date

Approved by:

**NERI C. OJASTRO EdD, CESO V**

3/18/24

Schools Division Superintendent  
Schools Division of Negros Oriental

Date



Republic of the Philippines  
**Department of Education**  
REGION VII – CENTRAL VISAYAS  
SCHOOLS DIVISION OF NEGROS ORIENTAL

**ITINERARY OF TRAVEL**  
For the month of **APRIL 2024**

**OBJECTIVES:**

1. To conduct dental health examination
2. To take blood pressure and blood sugar monitoring to teaching and non-teaching personnel in Division Office, District Office and in schools while maintaining the COVID 19 Protocol compliance.
3. To attend scheduled meetings in the Division Office and in schools.
4. To render health education to all teaching and non-teaching personnel in the Division Office, District Offices and in schools related to healthy living and COVID 19 safety protocols.
5. To evaluate District Offices and school visits as a whole.

**SCHEDULE OF ACTIVITIES:**

- |  |   |
|--|---|
| 1. DIVISION OFFICE CLINIC                    | 16. STA. CATALINA E/S                         |
| 2. STA. CATALINA CENTRAL E/S                 | 17. STA. CATALINA E/S                         |
| 3. MANALONGON NICOLAS N LAJOT CENTRAL SCHOOL | 18. DIVISION OFFICE CLINIC                    |
| 4. DIVISION OFFICE CLINIC                    | 19. MANALONGON NICOLAS N LAJOT CENTRAL SCHOOL |
| 5. DIVISION OFFICE CLINIC                    | 20. SATURDAY                                  |
| 6. SATURDAY                                  | 21. SUNDAY                                    |
| 7. SUNDAY                                    | 22. DIVISION OFFICE CLINIC                    |
| 8. DIVISION OFFICE CLINIC                    | 23. STA. CATALINA CENTRAL E/S                 |
| 9. HOLIDAY                                   | 24. STA. CATALINA CENTRAL E/S                 |
| 10. STA. CATALINA CENTRAL E/S                | 25. DIVISION OFFICE CLINIC                    |
| 11. DIVISION OFFICE CLINIC                   | 26. STA. CATALINA CENTRAL E/S                 |
| 12. STA. CATALINA CENTRAL E/S                | 27. SATURDAY                                  |
| 13. SATURDAY                                 | 28. SUNDAY                                    |
| 14. SUNDAY                                   | 29. DIVISION OFFICE CLINIC                    |
| 15. DIVISION OFFICE CLINIC                   | 30. STA. CATALINA CENTRAL E/S                 |

Note: (This schedule is subject to change when deemed necessary.)

Submitted by:

  
**NIÑA HYACINTH P. HERRERA**

Dentist II

Concurred:

  
**DR. KARINA LOUISE DE LA CRUZ**

Medical Officer III

Recommending Approval:

  
**RACHEL B. PICARDAL, Ed.D.**

SGOD, Chief Education Supervisor

Approved by:

  
**NERI C. OJASTRO EdD, CESO V**

Schools Division Superintendent  
Schools Division of Negros Oriental



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