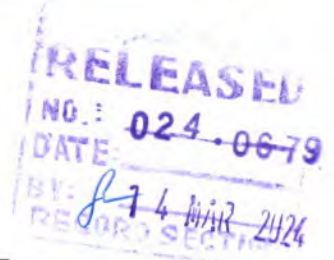




Republic of the Philippines  
Department of Education  
Schools Division of Negros Oriental



**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

<b>Name</b>	Maranatha Udjaji
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To render health care services to school learners and teaching personnel.
<b>Host of Activity</b>	SDO NegOr School Health Section
<b>Inclusive Dates</b>	Mar 13, 2024 - Lumbangan ES
<b>Destination</b>	Mabinay District 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.


  
**Maranatha Udjaji**

**March 12, 2024**

Name and Signature of Requesting Employee

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 EdD**  
Chief, Education Supervisor, SGOD

**MAR 12 2024**

Name and Signature of Recommending Authority

Date

**APPROVED**

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

**3/12/24**  
Date




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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

RELEASED  
NO.:  
DATE 024-0679  
14 MAR 2024  
SECTION

<b>Name</b>	<b>KENNITH C. MISAMIS, RN</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	Monitor and provide technical assistance to schools on the implementation of NDEP
<b>Host of Activity</b>	SDO Negros Oriental
<b>Inclusive Dates</b>	March 13 – Valencia District March 14 – Dauin District March 15 – Bacong District
<b>Destination</b>	Valencia, dauin and Bacong Districts
<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.*

  
**KENNITH C. MISAMIS, RN**

Name and Signature of Requesting Employee

March 12, 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 EdD**

Chief, Education Supervisor SGOD  
Name and Signature of Recommending Authority

MAR 12 2024

Date

Approved:

  
**NERI C. QUASTRO EdD CESO V**

Schools Division Superintendent

3/12/24

Date



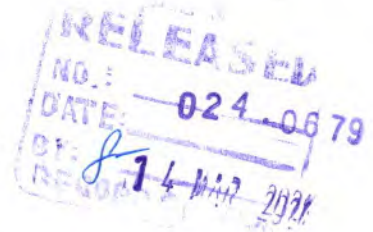
ANNEX A



Control No. 0181

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>JERRY CAMPOY/MINDA REGALADO</b>
<b>Position/Designation</b>	<b>DENTIST II, DENTAL AID</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>	March 19&22, 2024
<b>Venue/Destination</b>	San Jose 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.

  
**MINDA E. REGALADO**  
Name and Signature of Requesting Employee

March 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

MAR 13 2024  
Date

**APPROVED:**

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

3/13/24  
Date

ANNEX A



Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

Control No. CLM

RECEIVED  
RELEASED  
NO. 024-0679  
DATE 14 MAR 2024  
SECTION

**REGION:** VII- Central Visayas

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

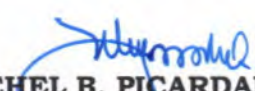
<b>Name</b>	<b>GWYNNE STACY MONCIDA</b>
<b>Position/Designation</b>	NURSE II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render health services to T&NT Personnel, Conduct health assessment among learners.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	3/14/2024 – SUMALIRING ES
<b>Venue/Destination</b>	SIATON 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.

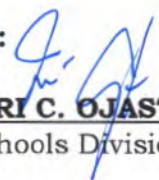
  
**GWYNNE STACY MONCIDA**  
Name and Signature of Requesting Employee

March 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

MAR 13 2024  
Date

**APPROVED:**  
  
**NERI C. OJASTRO EdD, CESO V**  
Schools Division Superintendent

3/13/24  
Date





ANNEX A



Control No. 0181

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

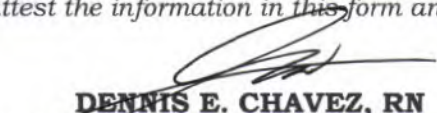
**REGION:** VII- Central Visayas

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

RELEASED  
NO: 024.0678  
DATE: 14 MAR 2024  
REGISTRATION


<b>Name</b>	<b>ALEXANDRIA N. RUPERTO, RN</b>
<b>Position/Designation</b>	NURSE II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Monitoring of WINs and OK sa DepEd program Implementation
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	March 13, 2024
<b>Venue/Destination</b>	Valencia 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.

  
**DENNIS E. CHAVEZ, RN**  
Name and Signature of Requesting Employee

March 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

MAR 13 2024  
Date

**APPROVED:**   
**NERI C. OJASTRO EdD, CESO V**  
Schools Division Superintendent

3/13/24  
Date



ANNEX A



Control No. 0181

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

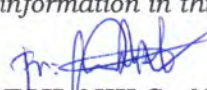
**REGION:** VII- Central Visayas

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

RELEASED  
NO.: n24-0679  
DATE: 14 MAR 2024  
BY: [Signature]

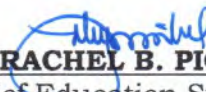
<b>Name</b>	<b>CARMI ANN S. ALFORQUE, RN</b>
<b>Position/Designation</b>	NURSE II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render health services to T&NT Personnel. Monitor Oksa DepEd Programs.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	3/13/2024 – Sta. Catalina CES 3
<b>Venue/Destination</b>	STA CATALINA DIST. 3
<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.

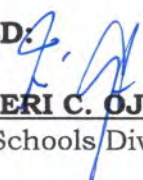
  
**CARMI ANN S. ALFORQUE, RN**  
Name and Signature of Requesting Employee

March 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

3/13/2024  
Date

**APPROVED:**   
**NERI C. OJASTRO EdD, CESO V**  
Schools Division Superintendent

3/13/24  
Date

ANNEX A



Control No. 0181

Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

RELEASE  
NO. 124-067  
DATE 14 MAR 2024

**REGION:** VII- Central Visayas

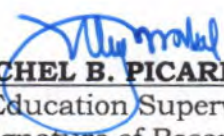
**BUREAU/DIVISION/SCHOOL:** DepEd, Schools Division of Negros Oriental

<b>Name</b>	<b>CHARLOTTE FRANCIS T. SINGSON</b>
<b>Position/Designation</b>	DENTIST II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render dental services to school learners, T & Non teaching personnel of assigned district.
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	3/14/2024
<b>Venue/Destination</b>	Salag ES , Siaton District 3
<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.*

  
**CHARLOTTE FRANCIS T. SINGSON, DMD**  
Name and Signature of Requesting Employee  
March 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  
MAR 13 2024  
Date

**APPROVED:**   
**NERI C. OJASTRO EdD, CESO V**  
Schools Division Superintendent  
MAR 14 2024  
Date