

ANNEX A

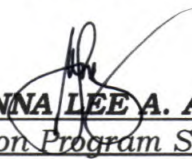

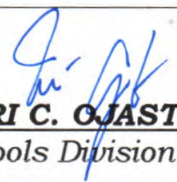
No.: 446



Republic of the Philippine  
Department of Education

023.1436  
15 MAY 2023  
8

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

<b>Name</b>	<b>DR. ANNA LEE A. AMORES MR. ARNOLD R. JUNGCO DR. BEN JOFIL B. DIEGO</b>
<b>Position/Designation</b>	Education Program Supervisors Education Program Specialist II
<b>Permanent Station</b>	DepEd Negros Oriental – CID
<b>Purpose of Travel</b> (must be supported by attachments)	To conduct the schools monitoring.
<b>Host of Activity</b>	Curriculum Implementation Division
<b>Inclusive Dates</b>	May 15, 2023
<b>Destination</b>	Amlan District
<b>Fund Source</b>	Division MOOE/Local Funds
<i>I hereby attest that the information in this form and in the supporting documents attached here to are true and correct.</i>	
<p> <b>DR. ANNA LEE A. AMORES</b> Education Program Supervisor</p> <p>_____ Name and Signature of Requesting Employee</p>	<p>5/15/2023</p> <p>_____ 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 purpose stated herein.</i>	
<p> <b>NILITA L. RAGAY EdD</b> OIC-ASDS/CID Chief</p> <p>_____ Name and Signature of Recommending Authority</p>	<p>_____ Date</p>
<p><b>APPROVED</b></p> <p> <b>NERI C. OJASTRO EdD CESE</b> Schools Division Superintendent</p> <p>_____ Name and Signature of Approving Authority</p>	<p>5/15/23</p> <p>_____ Date</p>