

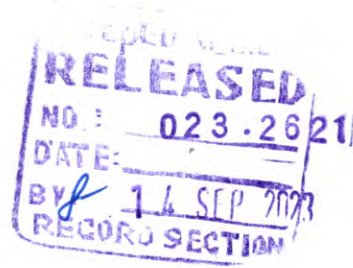
ANNEX A



Control No. 775

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>FELIX III D. MOSQUEDA</b>
<b>Position/Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To conduct nursing health assessment to teaching/non-teaching personnel and learners.
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	September 12 – Bolocboloc High School September 13 – Benjamin Loysin High School September 14 – Sibulan National High School
<b>Venue/Destination</b>	Sibulan I District schools
<b>Fund Source</b>	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

September 11, 2023  
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, Ed. D**  
Name and Signature of Recommending Authority

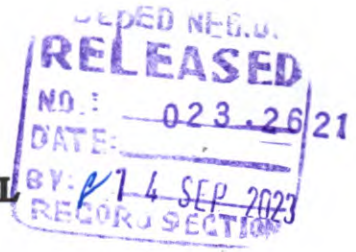
SEP 13 2023  
Date

  
**NERI C. OJASTRO EdD, CESE**  
Schools Division Superintendent

9/12/23  
Date



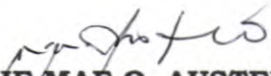
Republic of the Philippines  
Department of Education  
Schools Division of Negros Oriental



**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**


<b>Name</b>	<b>Melanie Mae O. Austero, RN</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To monitor OK sa DepEd programs and render health services.
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 13 – Bolisong ES September 14 – Malaga ES September 15 – Pangalaycayan ES September 18 – Cabugan ES
<b>Destination</b>	Manjuyod 2 and Bindoy 1 Districts
<b>Fund Source</b>	MOOE

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

  
**MELANIE/MAE O. AUSTERO**  
Name and Signature of Requesting Employee

September 12, 2023  
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

SEP 12 2023

Date

**APPROVED**

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

9/12/23

Date

ANNEX A



Control No. 175

DEPED NEGROS ORIENTAL  
**RELEASED**  
NO :  
DATE: 023-2621  
BY: f. 1.4 SLP 2023  
RECORD SECTION

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>Mark Lester Amolo, RN &amp; Arcia Pasquil, DMD</b>
<b>Position/Designation</b>	Nurse II and Dentist II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To render health services to T and NTP and to monitor OKD programs
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	Sept. 13, 2023- Domolog ES Sept. 14, 2023- Canluto ES
<b>Venue/Destination</b>	Bindoy 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.*

Mark Lester Amolo  
Name and Signature of Requesting Employee

Sept. 12, 2023  
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

SEP 12 2023  
Date

Approved

**NERI C. OJASTRO EdD, CESE**  
Schools Division Superintendent  
Schools Division of Negros Oriental  
Name and Signature of Approving Authority

9/12/23  
Date

ANNEX A

ANNEX A



Control No. 775

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

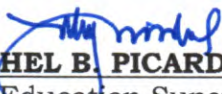
<b>Name</b>	<b>ESTER I. NUEZ</b>
<b>Position/Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To render health services to Teaching and Non-teaching personnel and conduct health assessment to school learners
<b>Host of Activity</b>	Division Office
<b>Period Covered (Inclusive of Travel Time)</b>	September 13-15, 2023 - San Jose CES September 18, 2023 - San Roque ES
<b>Venue/Destination</b>	San Jose District
<b>Fund Source</b>	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

September 12, 2023  
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

SEP 12 2023  
Date

Approved:

  
**NERI C. OJASTRO EdD, CESE**  
Schools Division Superintendent

9/12/23  
Date



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**



<b>Name</b>	<b>BRENT JOHN D. TRASMONTE, RN</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To monitor OK sa DepEd programs and render health services.
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 13, 2023 – Jose A. Remollo MES
<b>Destination</b>	San Jose District
<b>Fund Source</b>	MOOE

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


  
**BRENT JOHN D. TRASMONTE**

September 12, 2023

Date

Name and Signature of Requesting Employee

*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

SEP 12 2023

Date

Name and Signature of Recommending Authority

**APPROVED**

  
**NERI C. OJASTRO EdD, CESE**  
Schools Division Superintendent

9/13/23

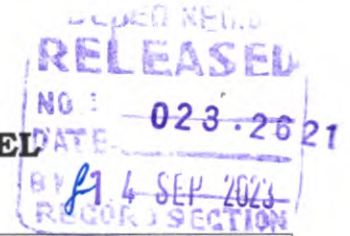
Date

Name and Signature of Approving Authority



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**



<b>Name</b>	<b>Emilda Chiu</b>
<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 services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	Malongcay ES- Sept 13-14, 2023 Basak ES- Sept 18, 2023
<b>Destination</b>	Zamboanguita DISTRICT 1
<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.*

*Emilda K. Chiu*  
**Emilda K. Chiu, RN**

**Sept. 12, 2023**

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*  
**RACHEL B. PICARDAL, EdD**

Chief, Education Supervisor, SGOD

**SEP 12 2023**

Name and Signature of Recommending Authority

Date

**APPROVED**

*Neri C. Ojastro*  
**NERI C. OJASTRO, EdD, CESE**

Schools Division Superintendent

Name and Signature of Approving Authority

Date

ANNEX A



Control No. 775

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>ELLEN R. MAYAGMA, RN</b>
<b>Position/Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	Render health services to teaching and non-teaching personnel.
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	September 13, 2023- Bacong Central School September 14, 2023- Isugan Elem. School September 15, 2023- Sacsac Elem. School September 18, 2023- Bacong Central School
<b>Venue/Destination</b>	Bacong District
<b>Fund Source</b>	MOOE

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

  
**Ellen R. Mayagma, RN** September 12, 2023  
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** SEP 12 2023  
Name and Signature of Recommending Authority Date




Approved by:  
  
**NERI C. OJASTRO EdD, CESE** \_\_\_\_\_  
Schools Division Superintendent Date  
Schools Division of Negros Oriental



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**



<b>Name</b>	<b>Mark Anthony Pajuelas</b>
<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 services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	Pio Macahig ES- Sept 13-14, 2023
<b>Destination</b>	Siaton DISTRICT 4
<b>Fund Source</b>	Division MOOE
<p><i>I hereby attest that the information in this form and in the supporting documents attached hereto are true and correct.</i></p> <p style="text-align: center;">   <b>Mark Anthony Pajuelas, RN</b>          Name and Signature of Requesting Employee       </p> <p style="text-align: right;"> <b>Sept. 12, 2023</b>          Date       </p>	
<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> <p style="text-align: center;">   <b>RACHEL B. PICARDAL, EdD</b>          Chief, Education Supervisor, SGOD          Name and Signature of Recommending Authority       </p> <p style="text-align: right;"> <b>SEP 12 2023</b>          Date       </p>	
<p><b>APPROVED</b></p> <p style="text-align: center;">   <b>NERI C. OJASTRO, EdD, CESE</b>          Schools Division Superintendent          Name and Signature of Approving Authority       </p> <p style="text-align: right;"> <b>9/13/23</b>          Date       </p>	





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



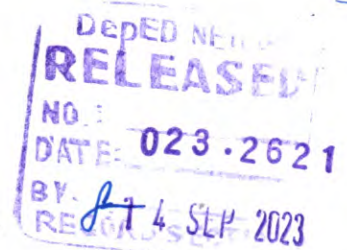
**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

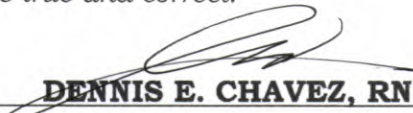
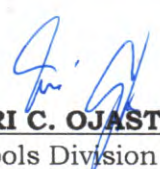
<b>Name</b>	<b>SUZETTE S. ONDE</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To render health services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	Sept 13 – Bindoy CES
<b>Destination</b>	Bindoy 1 District
<b>Fund Source</b>	Division MOOE
<p><i>I hereby attest that the information in this form and in the supporting documents attached hereto are true and correct.</i></p> <p style="text-align: center;"><i>Suzette S. Onde</i> <b>Suzette S. Onde, RN</b></p> <p>Name and Signature of Requesting Employee</p> <p style="text-align: right;"><b>Sept 13, 2023</b> Date</p>	
<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> <p style="text-align: center;"><i>Rachel B. Picardal</i> <b>RACHEL B. PICARDAL, EdD</b> Chief, Education Supervisor, SGOD</p> <p>Name and Signature of Recommending Authority</p> <p style="text-align: right;"><b>9/13/2023</b> Date</p>	
<p><b>APPROVED</b></p> <p style="text-align: center;"><i>Neri C. Ojastro</i> <b>NERI C. OJASTRO, EdD, CESE</b> Schools Division Superintendent</p> <p>Name and Signature of Approving Authority</p> <p style="text-align: right;"><b>9/14/23</b> Date</p>	



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**



<b>Name</b>	<b>DENNIS E. CHAVEZ, RN</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	Conduct health assessment to pupils. To render health services to teaching and non-teaching personnel.
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 21-22, 2023 – Cangabo ES September 25-26, 2023 – Mandapaton ES September 28, 2023 – Bagtic ES September 29, 2023 – Manluminsag ES
<b>Destination</b>	Lalibertad 1&2
<b>Fund Source</b>	Division MOOE
<p><i>I hereby attest that the information in this form and in the supporting documents attached hereto are true and correct.</i></p> <p style="text-align: center;">   <b>DENNIS E. CHAVEZ, RN</b>        Name and Signature of Requesting Employee     </p> <p style="text-align: right;">       September 13, 2023        Date     </p>	
<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> <p style="text-align: center;">   <b>RACHEL B. PICARDAL EdD</b>        Chief, Education Supervisor SGOD        Name and Signature of Recommending Authority     </p> <p style="text-align: right;">       SEP 13 2023        Date     </p>	
<p>Approved</p> <p style="text-align: center;">   <b>NERI C. OJASTRO, EdD, CESE</b>        Schools Division Superintendent     </p> <p style="text-align: right;">       9/14/23        Date     </p>	



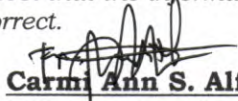
Republic of the Philippines  
 Department of Education  
 Schools Division of Negros Oriental

RELEASED  
 NO.:  
 DATE: 023-2621  
 BY: 814 SEP 2023  
 REGISTRAR

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

<b>Name</b>	<b>CARMI ANN S. ALFORQUE</b>
<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 services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 13 & 15, 2023
<b>Destination</b>	PIO MACAHIG MES, Siaton District IV
<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.

  
**Carmi Ann S. Alforque, RN**

**September 13, 2023**

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**

**SEP 13 2023**

Chief, Education Supervisor, SGOD

Name and Signature of Recommending Authority

Date

**APPROVED**

  
**NERI C. OJASTRO, EdD, CESE**

**9/14/23**

Schools Division Superintendent  
 Name and Signature of Approving Authority

Date



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

DEPED NEGROS ORIENTAL  
**RELEASED**  
 NO: \_\_\_\_\_  
 DATE: 023-2621  
 BY: R 14 SEP 2023  
 RECEIVED

<b>Name</b>	<b>Maria Nehmia Besario</b>
<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 services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 13, 2023
<b>Destination</b>	Bagtic ES, Mabinay 1
<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.

*[Signature]*  
**Maria Nehmia Besario, RN** **September 13, 2023**  
 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.

*[Signature]*  
**RACHEL B. PICARDAL, EdD** **SEP 13 2023**  
 Chief, Education Supervisor, SGOD Date  
 Name and Signature of Recommending Authority

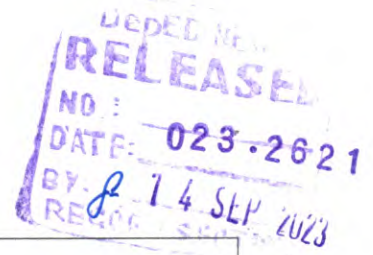
**APPROVED**

*[Signature]*  
**NERI C. OJASTRO, EdD, CESE** **9/14/23**  
 Schools Division Superintendent Date  
 Name and Signature of Approving Authority



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

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**



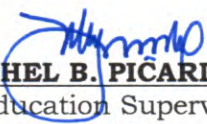
<b>Name</b>	<b>Maria Nehmia Besario</b>
<b>Position/ Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b> (must be supported by attachments)	To render health services to non-teaching and teaching personnel
<b>Host of Activity</b>	Division Office
<b>Inclusive Dates</b>	September 13, 2023
<b>Destination</b>	Bagtic ES, Mabinay 1
<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.

  
**Maria Nehmia Besario, RN**  
Name and Signature of Requesting Employee

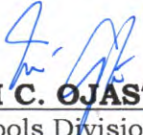
**September 13, 2023**  
Date

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

**SEP 13 2023**  
Date

**APPROVED**

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

**9/14/23**  
Date

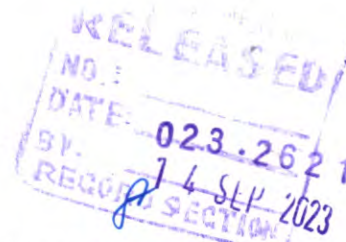


Republic of the Philippines  
Department of Education

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

**REGION:** VII- Central Visayas

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



<b>Name</b>	<b>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. Conduct health teaching on healthy lifestyle.
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	September 14, 2023- SASMES Sept. 28-29, 2023- Gomentoc ES September 15 and 18, 2023- Dunggo-an ES September 19, 2023- Ayungon 1 District Off. September 25-26, 2023- Tumampon ES
<b>Venue</b>	Ayungon 1 and Manjuyod 1 Districts
<b>Fund Source</b>	MOOE

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

**ANA MAE C. FESARIT, RN**  
Name and Signature of Requesting Employee

September 13, 2023  
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, Ed. D** ✓  
Chief, Education Supervisor  
Name and Signature of Recommending Authority

SEP 13 2023  
Date

Approved:

**NERI C. OJASTRO, Ed.D, CSE**  
Schools Division Superintendent  
Schools Division of Negros Oriental

9/14/23  
Date



Control No. 775

**ANNEX A**

Republic of the Philippines  
**Department of Education**

**TRAVEL AUTHORITY FOR OFFICIAL TRAVEL**

RELEASED  
 NO: \_\_\_\_\_  
 DATE: 023.262  
 BY: [Signature]  
 RECORDED: 14 SEP 2023

**REGION:** VII- Central Visayas

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

<b>Name</b>	<b>Brent John D. Trasmonte, RN</b>
<b>Position/Designation</b>	Nurse II
<b>Permanent Station</b>	Division Office
<b>Purpose of Travel</b>	To render health services to T and NTP and to monitor OKD programs
<b>Host of Activity</b>	Division Office
<b>Period Covered</b> (Inclusive of Travel Time)	Sept. 14, 2023-
<b>Venue/Destination</b>	Silab HS, 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.*

[Signature]  
**BRENT JOHN D. TRASMONTE, RN**  
 Name and Signature of Requesting Employee

Sept. 13, 2023  
 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.*

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

SEP 14 2023  
 Date

Approved

[Signature]  
**NERI C. OJASTRO EdD, CESE**  
 Schools Division Superintendent  
 Schools Division of Negros Oriental  
 Name and Signature of Approving Authority

9/14/23  
 Date