



Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION
SCHOOLS DIVISION OF BAGUIO CITY

Control No.

TRAVEL AUTHORITY FOR OFFICIAL TRAVEL
(for SDO employees & School Heads)

NAME	
Position/Designation	
Permanent Station	
Purpose of Travel <i>(must be supported by attachment)</i>	
Host of Activity	
Inclusive Dates	
Destination	
Fund Source	

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

Name and Signature of Requesting Employee

Date

RECOMMENDING APPROVAL

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.

CHRISTOPHER C. BENIGNO EdD, PhD, CESO VI
Assistant Schools Division Superintendent

Date

APPROVED

SORAYA T. FACULO PhD, CESO VI
Schools Division Superintendent

Date





Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION
SCHOOLS DIVISION OF BAGUIO CITY

Control No.

TRAVEL AUTHORITY FOR OFFICIAL TRAVEL

(for Teaching & School-Based Non-teaching Personnel/Destination within the Division)

NAME	
Position/Designation	
Permanent Station	
Purpose of Travel <i>(must be supported by attachment)</i>	
Host of Activity	
Inclusive Dates	
Destination	
Fund Source	

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

Name and Signature of Requesting Employee

Date

APPROVED

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.

SORAYA T. FACULO PhD, CESO VI
Schools Division Superintendent

Date





Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION
SCHOOLS DIVISION OF BAGUIO CITY

Control No.

TRAVEL AUTHORITY FOR OFFICIAL TRAVEL

(for Teaching & School-Based Non-teaching Personnel/Destination outside the Division)

NAME	
Position/Designation	
Permanent Station	
Purpose of Travel <i>(must be supported by attachment)</i>	
Host of Activity	
Inclusive Dates	
Destination	
Fund Source	

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

Name and Signature of Requesting Employee

Date

RECOMMENDING APPROVAL

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.

School Head

Date

APPROVED

SORAYA T. FACULO PhD, CESO VI

Schools Division Superintendent

Date





Republic of the Philippines
Department of Education
CORDILLERA ADMINISTRATIVE REGION
SCHOOLS DIVISION OF BAGUIO CITY

Control No.

TRAVEL AUTHORITY FOR PERSONAL TRAVEL

NAME	
Position/Designation	
Permanent Station	
Inclusive Dates	
Destination	
<i>I hereby attest that the information in this form and in the supporting documents attached hereto are true and correct.</i>	
Name and Signature of Requesting Employee	
Date	
RECOMMENDING APPROVAL	
SORAYA T. FACULO PhD, CESO VI Assistant Schools Division Superintendent Officer-in-Charge Office of the Schools Division Superintendent	
Name and Signature of Recommending Authority	
APPROVED	
ESTELA P. LEON-CARIÑO EdD, CESO III Director IV/Regional Director	
Name and Signature of Approving Authority	
Date	

