



No.: _____

Republic of the Philippines
Department of Education

ANNEX A

TRAVEL AUTHORITY FOR OFFICIAL TRAVEL

NAME	
Position/Designation	
Permanent Station	
Purpose of Travel (must be supported by attachments)	
Inclusive Dates	
Destination	
Fund Source	
<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
<i>This is certify that the trip of the requesting employee satisfies all the minimum conditions for authorized official travel and that alternatives to travel are sufficient for purpose stated herein:</i>	
<u>CELEDONIO B. BALDERAS JR.</u> Schools Division Superintendent	Date
Recommending Approval:	
<u>CARLITO D. ROCAFORT</u> Director IV	Date
APPROVED:	
Name and Signature of Approving Authority	Date

(ANNEX D of DepEd Order 043, s 2022 as amended by DepEd Order No. 46, s. 2022)