



Republic of the Philippines  
**Department of Education**  
 REGION IV- A CALABARZON  
 CITY SCHOOLS DIVISION OF THE CITY OF TAYABAS

**ICT Technical Assistance Form**

Requester's Name: \_\_\_\_\_ Date Reported: \_\_\_\_\_  
 Position: \_\_\_\_\_ Dep't/Unit/Section: \_\_\_\_\_

Technical Assistance:

- Repair     Network Management     Installation  
 Set-Up     Internet Connectivity     Configuration  
 Others (Please Specify) \_\_\_\_\_

Details/Description:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Requester's Signature Over Printed Name

To be filled by the ICT Unit:

Received by:	Checked by:  <b>MARK BRYAN F. VALENCIA</b> Information Technology Officer I
Action Taken	Remarks/Recommendation
Date & Time Started: _____ Status: Pending                      Completed	Date & Time Completed: ICS Number : _____

**CELEDONIO B. BALDERAS JR.**  
 Schools Division Superintendent



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