

TO NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AUTHORITY TO TRAVEL**

|  |  |
| --- | --- |
| **Date of Filing:***(Month day, year)* |  |
| **Name** | **Position/Designation** | **Signature/Remarks** |
|  |  |  |
|  |  |  |
|  |  |  |
| **Official Station:** |  |
| **Destination:** |  |
| **Date of travel:***(inclusive of travel time)* |  |
| **Purpose:** | To….. |
| **Activity organized/ sponsored by:** |  |
| **Travel is on:** |  [ ] Official Business [ ] Official Time |
| **Legal basis:** | [ ]  DepEd Memo [ ]  DepED Advisory[ ]  Invitation Letter [ ]  Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Expenses covered:***(subject to the usual accounting and auditing rules and regulations)* | Travelling Expense |
| **Fund source:** | [ ]  Local Funds [ ] Sub-ARO No.: \_\_\_\_\_\_\_\_\_\_\_\_ [ ]  HRTD [ ]  Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Check/Tick if applicable:** |
|  [ ]  With Government Vehicle [ ]  With Registration Fee |
| **Recommending Approval:** | **Approved:** |
| **CHIEF/PRINCIPAL***Position/Designation*Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ | **EDUARDO C. ESCORPISO JR. EdD, CESO VI***Assistant Schools Division Superintendent**Officer-in-Charge**Office of the Schools Division Superintendent*Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ |