



Department of the Interior and Local Government  
 Philippine Public Safety College  
 ROUTING SLIP



ROUTING SLIP No. \_\_\_\_\_

Subject: \_\_\_\_\_

FROM			FOR/TO			ACTION REQUESTED	
Date	Time	Office/ Unit	Date/Time Received	Office/ Unit	Received by:	No.	Write the Corresponding No. of the Action Requested
							1. For Approval/Signature 2. For Comment/Recommendation 3. For Study/Evaluation/Review 4. For Information/Reference 5. For Dissemination 6. For Notification 7. For Feedback 8. Request for Guidance 9. For Dispatch 10. For File 11. Others _____
<b>Additional Remarks:</b>							

Document Control No: PPSC-RS-2016 F01

Revision No: 0



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Philippine Public Safety College  
REQUEST FORM**



Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Surname First Name MI Month/Date/year

Name of Office: \_\_\_\_\_ Contact No.: \_\_\_\_\_

Information/Documents/Records requested				Specific Purpose/s:
<input type="checkbox"/>	Service Records	<input type="checkbox"/>	Certificate of Employment & Compensation	
<input type="checkbox"/>	Certificate of Employment	<input type="checkbox"/>	Certificate of Leave Credits	
<input type="checkbox"/>	Authority to Travel	<input type="checkbox"/>	Others pls. specify:	
Status of Document:			Action Taken:	
Available Record			<input type="checkbox"/>	Approved/Disapproved
No Record Maintained by Personnel and Records Section			<input type="checkbox"/>	Issued Certification
Already Disposed			<input type="checkbox"/>	No. of Copies authenticated

Approved:

Chief, Personnel and Records Section	Date
Document/Records received by/released to: _____	Printed Name and Signature of Requesting Party _____
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