ANNEX "C"

FOI REQUEST FORM

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FREEDOM OF IN	NFORMATION (FOI) REQUEST FORM
Title of the Document:	
Year Covered: (Please specify inclusive	date to expedite request)
Purpose:	
Name:	Contact Number
Signature:Address:	Date:
	Passport No
	Driver's License Other
Pr	roof of Identity:
low would you like to receive the informa	
mail:ax:	
ostal Address:	
ick-up (Office Hours):	-
ubmitted to:	PRINTED NAME AND SIGNATURE
ate / Time of Submission:	
ertified by:	PRINTED NAME AND SIGNATURE
pe of Action Conducted	Received by:
	University Receiving Officer (UROFoIM)
emarks:	



FORM G-618

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Par	t 1. Requestor Information	Part 1. Requestor Information
1.	Are you the Subject of Record for this request?	4. Requestor's Daytime Telephone Number
_	Yes No	
-	answered "No" to Item Number 1., provide the	5. Requestor's Mobile Telephone Number (if any
	nation requested in Part 2. If you answered "Yes" to Items er 1., skip to Part 3.	6. Requestor's Email Address (if any
varrio	iei 1., skip to rait 3.	o. Requestor's Email Address (if any
Poo	uestor's Full Name	
кеч	uestor s run Nume	Requestor's Certification
2. a.	Family Name	By my signature, I consent to pay all cost incurred for
	(Last Name)	duplication, and review of documents up to Php500. (
		Form G-618 Instructions for more information.)
2.b.	Given Name	7.a. Requestor's Signature
	(First name)	nequestor s signature
	(mothanie)	= L
2.c.	Middle Name	
		7.b. Date of Signature (mm/dd/yyyy)
Req	uestor's Mailing Address	Part 2. Description of Records Requeted
	•	
	In Case of Name (if any)	NOTE: While you are not required to respond to eve
	•	NOTE: While you are not required to respond to eve
B.a.	•	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or
3.a.	In Case of Name (if any)	NOTE: While you are not required to respond to eve
3.a. 3.b.	In Case of Name (if any)	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information
3.a. 3.b.	In Case of Name (if any) Street Number Street Name	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information
3.a. 3.b. 3.c.	In Case of Name (if any) Street Number	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
3.a. 3.b. 3.c. 3.d.	In Case of Name (if any) Street Number Street Name City or Town	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
3.a. 3.b. 3.c. 3.d.	In Case of Name (if any) Street Number Street Name	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
Req 3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested.
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested. 1. Purpose: Full Name of the Subject of Record
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested. 1. Purpose: Full Name of the Subject of Record 2.a Family Name
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested. 1. Purpose: Full Name of the Subject of Record 2.a Family Name (Last Name)
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested. 1. Purpose: Full Name of the Subject of Record Purpose Purpose
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE: While you are not required to respond to eve Item in Part 2., failure to provide complete and spec Information may delay processing of your request or create an inability to locate the records or information requested. 1. Purpose: Full Name of the Subject of Record 2.a Family Name (Last Name)

ANNEX "D"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – COMPLETION OF FORM

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
After processing request, we found that you have failed to provide the following necessary details: [list missing details]. For the processing of your request, please provide us with the necessary missing details.
Thank you and God Bless.
Respectfully,

ANNEX "E"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – EXTENSION OF PERIOD



FORM G-619

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

		_	
Part	1. Requestor Information	P	art 1. Requestor Information
1.	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number
If you	Yes No enswered "No" to Item Number 1., provide the	5.	Requestor's Mobile Telephone Number (if any)
-	ation requested in Part 2. If you answered "Yes" to Items	٥.	Requestor's Mobile Telephone Number (If any)
Numbe	er 1., skip to Part 3.	6.	Requestor's Email Address (if any
		1	L
Requ	uestor's Full Name	Re	equestor's Certification
2.a.	Family Name (Last Name)	dupli	y signature, I consent to pay all cost incurred for search cation, and review of documents up to Php500. (See G-619 Instructions for more information.)
2.b.	Given Name (First name)	7.a.	Requestor's Signature
2.c.	Middle Name	7.b.	Date of Signature (mm/dd/yyyy)
Requ	uestor's Mailing Address	Pa	rt 2. Description of Records Requeted
3.a.	In Case of Name (if any)	Iten	TE: While you are not required to respond to every n in Part 2. , failure to provide complete and specific
3.b.	Street Number	crea	rmation may delay processing of your request or te an inability to locate the records or information uested.
3.c.	Street Name		
3.d.	City or Town	1.	Purpose:
3.e.	Zip Code		
3.f.	Province		
3.g.	Phone Area Code	Fu	II Name of the Subject of Record
3.h.	Country	2.a	Family Name
			(Last Name)
		2.b	Given Name (First Name)
		2.c	Middle Name

ANNEX "F"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – CLARIFICATION

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
<u>Information Requested</u>
You asked for <quote request="">.</quote>
Response to your request
In order to fully process your request, may we ask for the following clarificatory details: [list needed details for processing of request].
Thank you and God Bless.
Respectfully,



FORM G-620

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Part	1. Requestor Information	P	art 1. Requestor Information
1.	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number
	Yes No		
-	nnswered "No" to Item Number 1., provide the	5.	Requestor's Mobile Telephone Number (if any)
	ation requested in Part 2. If you answered "Yes" to Items	c	Doguestor's Email Address /if any
Numbe	er 1., skip to Part 3.	6.	Requestor's Email Address (if any
		ı	
Requ	uestor's Full Name	Re	equestor's Certification
2.a.	Family Name		y signature, I consent to pay all cost incurred for search
2.a.	(Last Name)		ication, and review of documents up to Php500. (See
	(2000)	-	n G-620 Instructions for more information.)
			·
2.b.	Given Name	7.a.	Requestor's Signature
	(First name)		
2.0	Middle Name		
2.c.	Middle Name	7.b.	Date of Signature (mm/dd/yyyy)
		7.0.	Date of Signature (IIIII) dd/ yyyy)
Requ	uestor's Mailing Address	Pa	rt 2. Description of Records Requested
3.a.	In Case of Name (if any)	NO.	TE: While you are not required to respond to every
J.u.	in case of Name (ii arry)		n in Part 2., failure to provide complete and specific
			ormation may delay processing of your request or
3.b.	Street Number		te an inability to locate the records or information
2.0	Ctract Name	req	uested.
3.c.	Street Name	1.	Purpose:
3.d.	City or Town		
3.e.	Zip Code		
	<u> </u>		
3.f.	Province		
3.g.	Phone Area Code	Fu	II Name of the Subject of Record
3.h.	Country		
J.11.	Country	2.a	Family Name
			(Last Name)
		2.b	Given Name
		2.0	(First Name)
		2.c	Middle Name

ANNEX "G"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – APPROVAL

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
Your FOI request is APPROVED. Enclosed is a copy of [some/most/all]* of the requested information [in your preferred format].
Thank you and God Bless.

Respectfully,



FORM G-621

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. > START HERE – Type or print in black ink

Part	1. Requestor Information	Part 1. Requestor Information
1.	Are you the Subject of Record for this request?	4. Requestor's Daytime Telephone Number
	Yes No	
	nswered "No" to Item Number 1., provide the	5. Requestor's Mobile Telephone Number (if any)
	ation requested in Part 2. If you answered "Yes" to Items r 1., skip to Part 3.	6. Requestor's Email Address (if any
Numbe	1 1., 3kip to Fait 3.	o. Requestor's Email Address (if any
Rogu	restor's Full Name	1
Kequ	estor's Full Name	Requestor's Certification
2.a.	Family Name	By my signature, I consent to pay all cost incurred for search
	(Last Name)	duplication, and review of documents up to Php500. (See
		Form G-621 Instructions for more information.)
2 L	Circa Nama	1 7. Danishada Cimratura
2.b.	Given Name (First name)	7.a. Requestor's Signature
	(Histilanie)	<u> </u>
2.c.	Middle Name	
		7.b. Date of Signature (mm/dd/yyyy)
Requ	estor's Mailing Address	Part 2. Description of Records Requested
3.a.	In Case of Name (if any)	NOTE: While you are not required to respond to every
3.a.	in case of Name (if any)	Item in Part 2., failure to provide complete and specific
		Information may delay processing of your request or
3.b.	Street Number	create an inability to locate the records or information
		requested.
3.c.	Street Name	
		1. Purpose:
3.d.	City or Town	
2 -	7in Codo	
3.e.	Zip Code	
3.f.	Province	
J	Trovince	
3.g.	Phone Area Code	Full Name of the Subject of Record
3.h.	Country	
J	Country	2.a Family Name
		(Last Name)
		2.b Given Name
		(First Name)
		2.c Middle Name

ANNEX "H-1"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – DENIAL (contrary to law, rules and regulations)

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
Your FOI request is DENIED because it is contrary to [cite specific provision law, rule or regulation]. If you would like to appeal this denial, you may submit an appeal within fifteen (15) days from the receipt of this letter.
Thank you and God Bless.
Respectfully,



FORM G-622

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

		_		
Part	1. Requestor Information	Р	art 1. Requestor Information	
1.	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number	
	Yes No			
-	answered "No" to Item Number 1., provide the	5.	Requestor's Mobile Telephone Number (if a	ny)
	nation requested in Part 2. If you answered "Yes" to Items	_		
Numb	er 1., skip to Part 3.	6.	Requestor's Email Address (if any	
Req	uestor's Full Name	Re	equestor's Certification	
2.a.	Family Name		y signature, I consent to pay all cost incurred fo	or sea
	(Last Name)		cation, and review of documents up to Php500	
			G-622 Instructions for more information.)	•
		_		
2.b.	Given Name	7.a.	Requestor's Signature	
	(First name)	<u> </u>		
2.c.	Middle Name	<u>-</u>		
	Windle Nume	J 7.b.	Date of Signature (mm/dd/yyyy)	
			= 0.00 0.000.000.00 () 0.0/ //////	
_				
Req	uestor's Mailing Address	Pa	rt 2. Description of Records Requested	
·	<u> </u>			verv
·	In Case of Name (if any)	NO	TE: While you are not required to respond to e	-
·	<u> </u>	NO 1 Iten	TE: While you are not required to respond to end in Part 2., failure to provide complete and sp	ecifi
3.a.	<u> </u>	NO 1 Iten Info	TE: While you are not required to respond to e	ecific
3.a.	In Case of Name (if any)	NO Iten Info crea	FE: While you are not required to respond to end in Part 2., failure to provide complete and sports and sports are to provide complete and sports are to provide	ecific
3.a. 3.b.	In Case of Name (if any)	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c.	In Case of Name (if any) Street Number Street Name	NO Iten Info crea	TE: While you are not required to respond to end in Part 2., failure to provide complete and sport and its processing of your request the animability to locate the records or information.	ecific
3.a. 3.b. 3.c.	In Case of Name (if any) Street Number	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d.	In Case of Name (if any) Street Number Street Name City or Town	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d.	In Case of Name (if any) Street Number Street Name	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code	NOT Iten Info crea requ	FE: While you are not required to respond to end in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested.	ecific
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOT Iten Info creat requi	TE: While you are not required to respond to en in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested. Purpose: Il Name of the Subject of Record	ecific
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOT Iten Info crea requ	TE: While you are not required to respond to en in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested. Purpose: Il Name of the Subject of Record Family Name	ecifi or
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOT Iten Info creat requi	TE: While you are not required to respond to en in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested. Purpose: Il Name of the Subject of Record	ecifi or
Req 3.a. 3.b. 3.c. 3.d. 3.e. 3.f. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOT Iten Info creat requi	TE: While you are not required to respond to en in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested. Purpose: Il Name of the Subject of Record Family Name	ecific
3.a. 3.b. 3.c. 3.d. 3.e. 3.f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOT Iten Info creat required in the second re	TE: While you are not required to respond to en in Part 2., failure to provide complete and spormation may delay processing of your request te an inability to locate the records or informativested. Purpose: Il Name of the Subject of Record Family Name (Last Name)	ecific

ANNEX "H-2"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – DENIAL (falls under list of exceptions)

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
Your FOR request is DENIED because it falls under the list of exceptions, specifically [cite ground for exemption]. If you would like to appeal this denial, you may submit an appeal within fifteen (15) days from the receipt of this letter.
Thank you and God Bless.
Respectfully,



FORM G-623

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Par	t 1. Requestor Information	F	Part 1. Requestor Information
	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number
VOL	answered "No" to Item Number 1. , provide the	5.	Requestor's Mobile Telephone Number (if any)
	nation requested in Part 2. If you answered "Yes" to Items	3.	nequestor's wisbine receptione Number (if any)
umb	per 1., skip to Part 3.	6.	Requestor's Email Address (if any
Red	questor's Full Name	I _	
			equestor's Certification
a.	Family Name (Last Name)	dupl	ny signature, I consent to pay all cost incurred for sea ication, and review of documents up to Php500. (See n G-623 Instructions for more information.)
b.	Given Name (First name)	7.a.	Requestor's Signature
_	Middle Name	ī L	
C.	Middle Name	」 7.b.	Date of Signature (mm/dd/yyyy)
Req	questor's Mailing Address	Pa	ort 2. Description of Records Requested
a.	In Case of Name (if any)		TE: While you are not required to respond to every
			m in Part 2., failure to provide complete and specific prmation may delay processing of your request or
b.	Street Number	crea	ate an inability to locate the records or information
c .	Street Name	T	uested.
d.	City or Town	j 1.	Purpose:
e.	Zip Code	_	
f.	Province	1	
g.	Phone Area Code	-]	ıll Name of the Subject of Record
2 h	Country	-	
h.		2 .a	Family Name
h.		_	,
h.		J	(Last Name)
h.		2.b	,

ANNEX "I"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – SIMILAR TO PREVIOUS REQUEST

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
Since your requested information is substantially similar or identical to your previous request dated, the DON HONORIO VENTURA STATE UNIVERSITY shall not act upon your request. Please be guided accordingly.
Thank you and God Bless.
Respectfully,



FORM G-624

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Part 1. Requestor Information	Part 1. Requestor Information
Are you the Subject of Record for this request?	4. Requestor's Daytime Telephone Number
Yes No	
If you answered "No" to Item Number 1., provide the	5. Requestor's Mobile Telephone Number (if any)
information requested in Part 2. If you answered "Yes" to Items	
Number 1., skip to Part 3.	6. Requestor's Email Address (if any
Requestor's Full Name	Requestor's Certification
2.a. Family Name (Last Name)	By my signature, I consent to pay all cost incurred for search duplication, and review of documents up to Php500. (See Form G-624 Instructions for more information.)
2.b. Given Name	7.a. Requestor's Signature
(First name)	
2.c. Middle Name	7.b. Date of Signature (mm/dd/yyyy)
Requestor's Mailing Address	Part 2. Description of Records Requested
3.a. In Case of Name (if any)	NOTE: While you are not required to respond to every Item in Part 2., failure to provide complete and specific
3.b. Street Number	Information may delay processing of your request or create an inability to locate the records or information requested.
3.c. Street Name	
3.d. City or Town	1. Purpose:
3.e. Zip Code	
3.f. Province	
3.g. Phone Area Code	Full Name of the Subject of Record
3.h. Country	
	2.a Family Name (Last Name)
	2.b Given Name
	(First Name) 2.c Middle Name
	L

ANNEX "J"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – AVAILABLE ONLINE

PATE
Dear
Greetings!
hank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
nformation Requested
ou asked for <quote request="">.</quote>
esponse to your request
Ve would like to inform you that your requested information can be FOUND ONLINE at the website of the DON HONORIO VENTURATE UNIVERSITY. Your requested information can be found at the following link/s: [http://www.dhvtsu.edu.ph/].
hank you and God Bless.
espectfully,



FORM G-625

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Part	1. Requestor Information	Pa	art 1. Requestor Information
1.	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number
	Yes No		
f you	answered "No" to Item Number 1., provide the	5.	Requestor's Mobile Telephone Number (if any)
	nation requested in Part 2. If you answered "Yes" to Items		
lumb	er 1., skip to Part 3.	6.	Requestor's Email Address (if any
		_	
Req	uestor's Full Name		
			questor's Certification
2.a.	Family Name		signature, I consent to pay all cost incurred for sea
	(Last Name)	_	cation, and review of documents up to Php500. (See
		Form	G-625 Instructions for more information.)
.b.	Given Name	7.a.	Requestor's Signature
	(First name)	l ' "	nequestor 3 signature
	(institutio)	;	
2.c.	Middle Name		
		7.b.	Date of Signature (mm/dd/yyyy)
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Pag	uestor's Mailina Address		
Req	uestor's Mailing Address		t 2. Description of Records Requested
•	<u> </u>	Par	t 2. Description of Records Requested
Req	uestor's Mailing Address In Case of Name (if any)	Par	
·	<u> </u>	Par NOT	t 2. Description of Records Requested E: While you are not required to respond to every
l.a.	<u> </u>	Par NOT Item Infor create	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information
3.a. 3.b.	In Case of Name (if any) Street Number	Par NOT Item Infor create	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or
s.a. s.b.	In Case of Name (if any)	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
3.a. 3.b. 3.c.	In Case of Name (if any) Street Number Street Name	Par NOT Item Infor create	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information
3.a. 3.b. 3.c.	In Case of Name (if any) Street Number	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
.a. .b. .c. .d.	In Case of Name (if any) Street Number Street Name City or Town	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
.a. .b. .c. .d.	In Case of Name (if any) Street Number Street Name	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
3.a. 3.b. 3.c. 3.d.	In Case of Name (if any) Street Number Street Name City or Town	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOT Item Infor create requ	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
.a. .b. .c. .d. .e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code	NOTI Item Infor create requi	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested.
a. b. c. d. e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTI Item Infor create requi	t 2. Description of Records Requested E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested. Purpose:
.a. .b. .c. .d. .e. .f.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province	NOTI Item Infor create requi	E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested. Purpose: Name of the Subject of Record
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTI Item Infor create requi	E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested. Purpose: Name of the Subject of Record
3.a. 3.b. 3.c. 3.d. 3.e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE Item Infor create required. 1. Full	E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested. Purpose: Name of the Subject of Record
·	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTI Item Infor create requi	E: While you are not required to respond to every in Part 2., failure to provide complete and specific rmation may delay processing of your request or e an inability to locate the records or information ested. Purpose: Name of the Subject of Record
a. b. c. d. e.	In Case of Name (if any) Street Number Street Name City or Town Zip Code Province Phone Area Code	NOTE Item Infor create required. 1. Full	E: While you are not required to respond to every in Part 2., failure to provide complete and specific mation may delay processing of your request or e an inability to locate the records or information ested. Purpose: Name of the Subject of Record

ANNEX "K-1"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – NOT IN CUSTODY (information with other executive agency)

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
We would like to inform you the DON HONORIO VENTURA STATE UNIVERSITY is NOT IN POSSESSION of the information you have requested. As such, we have transmitted your request to [NAME OF AGENCY] which can properly process yourrequest. You may follow up your request with [NAME OF CONTACT PERSON] at this number [CONTACT NUMBER OF AGENCY].
Thank you and God Bless.
Respectfully,



FORM G-626

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

Part	: 1. Requestor Information	Part 1. Requestor Information
1.	Are you the Subject of Record for this request?	4. Requestor's Daytime Telephone Number
	Yes No	
-	answered "No" to Item Number 1., provide the	5. Requestor's Mobile Telephone Number (if any)
	nation requested in Part 2. If you answered "Yes" to Items	
Numb	er 1., skip to Part 3.	6. Requestor's Email Address (if any
		_
Req	uestor's Full Name	De superto de Contificantia a
		Requestor's Certification
2.a.	Family Name	By my signature, I consent to pay all cost incurred for search
	(Last Name)	duplication, and review of documents up to Php500. (See
		Form G-626 Instructions for more information.)
2.b.	Given Name	7.a. Requestor's Signature
2.0.	(First name)	7.a. Requestor's Signature
	(institutio)	1
2.c.	Middle Name	
		7.b. Date of Signature (mm/dd/yyyy)
_		
Req	uestor's Mailing Address	Part 2. Description of Records Requeted
3.a.	In Case of Name (if any)	NOTE: While you are not required to respond to every
3.a.	In Case of Name (if any)	NOTE: While you are not required to respond to every Item in Part 2., failure to provide complete and specific
		Information may delay processing of your request or
3.b.	Street Number	create an inability to locate the records or information
0	Street Halling.	requested.
3.c.	Street Name	1
		1. Purpose:
3.d.	City or Town	
3.e.	Zip Code	
		1
3.f.	Province	
•		1
3.g.	Phone Area Code	Full Name of the Subject of Record
3.h.	Country	
3.11.	Country	2.a Family Name
		(Last Name)
		2.b Given Name
		(First Name) 2.c Middle Name
		2.0 IVIIIGUIE IVAITIE

ANNEX "K-2"

Republic of the Philippines DON HONORIO VENTURA STATE UNIVERSITY Bacolor, Pampanga

FOI RESPONSE TEMPLATE – NOT IN CUSTODY (information with agency covered by E.O No. 2)

DATE
Dear
Greetings!
Thank you for your request datedunder Executive Order No. 2 (s. 2016) on Freedom of Information in the Executive Branch. The DON HONORIO VENTURA STATE UNIVERSITY in compliance with the said Order is very pleased to serve you.
Information Requested
You asked for <quote request="">.</quote>
Response to your request
We would like to inform you the DON HONORIO VENTURA STATE UNIVERSITY is NOT IN POSSESSION of the information you have requested. As such, we have transmitted your request to [NAME OF AGENCY] which can properly process your request. You may follow up your request with [NAME OF CONTACT PERSON] at this number [CONTACT NUMBER OF AGENCY].
Thank you and God Bless.
Respectfully,



FORM G-627

Freedom of Information/Privacy Act Request

Note: Use of this request is optional. Any written format for a Freedom of Information of Privacy Act request is acceptable. **START HERE** – Type or print in black ink

		_	
Part	1. Requestor Information	P	art 1. Requestor Information
1.	Are you the Subject of Record for this request?	4.	Requestor's Daytime Telephone Number
If you	Yes No	5.	Requestor's Mobile Telephone Number (if any)
If you answered "No" to Item Number 1., provide the information requested in Part 2. If you answered "Yes" to Items		5.	Requestor's Mobile Telephone Number (If any)
Numbe	er 1., skip to Part 3.	6.	Requestor's Email Address (if any
Requ	uestor's Full Name	Re	questor's Certification
2.a.	Family Name (Last Name)	dupli	y signature, I consent to pay all cost incurred for search cation, and review of documents up to Php500. (See G-627 Instructions for more information.)
2.b.	Given Name (First name)	7.a.	Requestor's Signature
2.c.	Middle Name	7.b.	Date of Signature (mm/dd/yyyy)
Requ	uestor's Mailing Address	Pa	rt 2. Description of Records Requeted
3.a.	In Case of Name (if any)	Iten	TE: While you are not required to respond to every in in Part 2., failure to provide complete and specific
3.b.	Street Number	crea	rmation may delay processing of your request or te an inability to locate the records or information uested.
3.c.	Street Name		
3.d.	City or Town	1.	Purpose:
3.e.	Zip Code		
3.f.	Province		
3.g.	Phone Area Code	Fu	II Name of the Subject of Record
3.h.	Country	2.a	Family Name
			(Last Name)
		2.b	Given Name (First Name)
		2.c	Middle Name