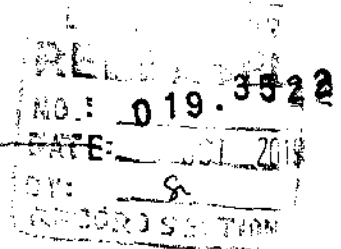




Republic of the Philippines
 DEPARTMENT OF EDUCATION
 Region VII, Central Visayas

SCHOOLS DIVISION OF NEGROS ORIENTAL
 www.depednegor.net



October 25, 2019

TRAVEL ORDER

No. 1498, s. 2019

TO : **EMMA S. MATE, PhD.**
 Senior Education Program Specialist
Social Mobilization/Networking/Partnership

PURPOSE : To attend and participate in the CEHP Year End Assessment and Planning Workshop as member of the Negros Oriental OEHT in Coordination with partner organizations - the FRED HOLLOW FOUNDATION and Negros Oriental Provincial Government.

DATE OF TRAVEL : November 26-29, 2019

VENUE/PLACE : Be Resort , Mactan, Cebu City

ALLOWED/CHARGED TO: *(Subject to the usual accounting and auditing rules and regulations)*

- _____ : Registration/Transportation and other expenses
- _____ : Transportation
- _____ : Per Diems
- _____ : On official time/business only
- _____ : Charged to personal funds
- _____ : Transportation/per diem and other incidental expenses incurred shall be charged to Division MOOE.

Note: All expenses charge against FRED HOLLOW FOUNDATION as per communication.

WILFREDA D. BONGALOS, Ph.D., CESO V
 Schools Division Superintendent
 10/24/19

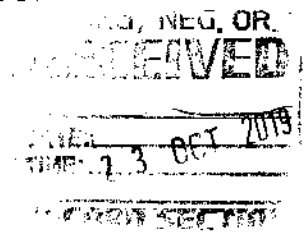
15 October 2019



**The Fred Hollows
Foundation**

MS WILFREDA D. BONGALOS, PhD, CESO V

Schools Division Superintendent - Negros Oriental Division
Department of Education
Negros Oriental Province



Dear Superintendent Bongalos,

As part of The Fred Hollows Foundation's continuing support to the project *Assisting Community Eye Health Program (CEHP) in Four Philippine Provinces*, FHF is organizing a **Year End Assessment and Planning Workshop** to be held on November 26 - 29, 2019 (inclusive of travel) at the Be Resort in Mactan, Cebu.

The workshop aims to gather the representatives from the four Provincial Eye Health Teams (PEHT) to assess and analyze this year's project implementation and facilitate learning amongst all partners. In addition, the workshop aims to evaluate the efficiency and effectiveness of the project in achieving its intended outcomes towards improving program design and implementation for next year.

May we please invite **Dr Emma Mate, Senior Education Program Specialist of DepEd Negros Oriental Division** who is a member of the Negros Oriental PEHT, to participate in this Year End workshop, to join representatives from the Governor's Office or Sangguniang Panlalawigan, the PHO, Provincial Hospital, PIO, NCIP, DSWD-4Ps, and a partner Ophthalmologist and Optometrist.

The Foundation shall cover all costs related to the meeting including airfare, local travel, accommodation and meals; while per diems shall be borne by their respective sending offices. Please note that once flight and hotel bookings have been confirmed, the Foundation shall not cover charges related to hotel or flight changes.

May we please also request your office to fill-up and send back the attached Confirmation of Participation by October 18, Friday. We look forward to your support and approval of their travel order for this purpose. For coordination and more information, please feel free to contact Faye at 0917-354-7303. Thank you!

Very truly yours,

Mardi Mapa-Suplido
Country Manager



The Fred Hollows
Foundation

CONFIRMATION OF PARTICIPATION

Assisting Community Eye Health Program in Four Philippine Provinces
Year End Assessment and Planning Workshop
26-29 November 2019 | Be Resort, Mactan, Cebu

	NAME	OFFICE & DESIGNATION	SEX	BIRTHDATE	SIGNATURE
1					

To all participants, please read the **FHF CANCELLATION POLICY** before signing above:

The participant will reimburse FHF for unused confirmed airline tickets and the cost related to the cancellation of her/his attendance to the workshop, such as airline cancellation and no show fees. In case hotel bookings have already been arranged based on their confirmed attendance, the participant shall also be requested to pay/reimburse FHF for the cost of the accommodation. I certify that I read and understand the aforementioned guidelines.

Provincial list of representatives, endorsed by:

Name / Signature / Date