

REQUEST FOR ISSUANCE OF ACCESS PASS

REMINDERS

The Access Pass holder agrees to comply with all the rules and regulations in connection with the Access Pass, including wearing it whenever inside DLSU premises, including satellite facilities. The holder commits to ensure that the Access Pass is always in presentable form.

Applicants are required to pay P150 at the Accounting Office for the Access Pass. Replacement for lost/damaged Access Pass shall be assessed at P500.00.
 The Access Pass shall remain the property of DLSU and may be revoked any time.

The Access Pass must be renewed before its expiration date. Renewal of expired Access Pass shall be subject to a penalty of P500.00.

The following must be attached to this form: (1) Photocopy of a Govt ID (2) NBI clearance (3) Drug clearance certificate from Hi-Precision

(4) Official Receipt (5) Health Certificate issued by the City of Manila (for food concessions only)

PLEASE PR	INT										
Date	Office Ass	Office Assignment		Agency		Туре					ID Number
						Issuar	nce/New 🛛 Renew	val 🛛 Repla	acement		
		Last			-	First		•	Mido	dle	
Full Name											
Email Address				Mobile Number			Office Local No.				
With Company-Based Contract Period				With Individual Deployment Period			Others*				
Security Safety Contract	Sanitation Grounds or Maintenance	Health		search	Project	ltant	Support	Affiliate	BrosC	Com	Auxiliary (Personal)
Period of Contract with DLSU				Deployment period at DLSU							
Start Date			Start End	Date Date				Valid for a maximum		Valid for a maximum of six (6) months	
End Date			c	CHRSO	clearance (fo	r AGENCY/	SUPPORT only)				
Applicant for Access Pass				Applicant for Access Pass				Applicant for Access Pass			
Signature over printed name / Date Supervising Administrator				Signature over printed name / Date Supervising Administrator			Signature over printed name / Date Supervising Administrator				
Signature over printed name / Date				Signature over printed name / Date			Signature over printed name / Date				

Data Privacy Consent

I, ______ of legal age, hereby agrees and gives my full consent to De La Salle University to collect, process, store and disclose my personal data in relation to the purpose of issuance of a campus access pass.

Signature over printed name / Date

>>>> DO NOT FILL BEYOND THIS POINT <<<<<

Access Pass Co	ontrol Number	Step	Signature / Date	Notes		
Access Pass Code						
Personnel Number		[1] Received (SJ 108)				
Release Number				Claiming (SJ 108)		
Official Receipt No. / Date		[2] Indexing (HSSH 1504)				
		[3] Processing (HSSH 1504)				

* Application should be accompanied by a request letter indicating type of work done, frequency of access to campus, and source of compensation.



Office of the Vice President for Administration

PROCEDURES FOR REQUESTING THE ACCESS PASS

The Access Pass is issued to non-DLSU personnel following the procedures below:

1. Accomplish the Request for Issuance of Access Pass (RIAP) form available at <u>https://www.dlsu.edu.ph/wp-content/uploads/pdf/vcadmin/riap.pdf</u>

Table of Fees

Issuance/Renewal P 150.00 Replacement of Lost/Damaged P 500.00 Penalty for renewal of expired Access Pass P 500.00 (in addition to renewal fee)

- 2. Pay the assessment at the Accounting Office using the Referral Slip (see next page).
- 3. Email the accomplished RIAP form and required documents to security@dlsu.edu.ph

Required documents

- 3.1.1 Photocopy of a valid government ID
- 3.1.2 Drug clearance from Hi-Precision
- 3.1.3 NBI clearance (for scanning only)
- 3.1.4 Contract (for Research, Consultant, Project)
- 3.1.5 Approved letter (for Affiliate, BrosCom and Auxiliary)
- 3.1.6 Health certificate issued by the City of Manila (for food concessions only)
- 3.1.7 Official Receipt

APPLICATIONS WITH INCOMPLETE DOCUMENTS WILL NOT BE PROCESSED

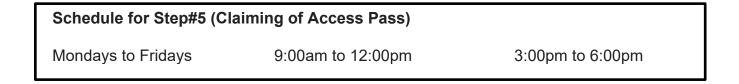
4. Proceed to Security Office, St. Joseph (SJ) Building Room 115 for the picture taking:

Schedule for Picture-Taking

Mondays to Fridays 10:00am to 11:30pm 4:0

4:00pm to 6:00pm

- 5. Picture Taking
 - 5.1 Picture will be taken upon presentation of the official receipt.
- 6. Claim the Access Pass at the Security Office (SJ 108) on the date specified. The original copy of the Official Receipt for the payment must be presented upon claiming of the Access Pass.





REFERRAL SLIP

TO: THE ACCOUNTING OFFICE

LAST NAME		
FIRST NAME		
Payment for Ac (Please choose		Payment to be credited to the following:
□ Issuance/Re	newal <u>150.00</u>	Account Name: ESP ID Fund
Replacemen	t <u>500.00</u>	
Penalty	<u>500.00</u>	GL Account Code: 11-4-13-40-221-00000-11000101-1-11-01-511001010-00-0000-0000
TOTAL		

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