



**Flexible Work Arrangements (FWA)
Request Form**

Name of Employee: France Arthur T. Tating Office/Service/Division/Unit: CTCO-CBSS-GMD
Date of Request: 14 August 2025 Effectivity of Requested FWA: For the month of September

Please tick the appropriate box before the applicable flexible work arrangement and respective schedule. Please note that the selected work arrangement will be applicable for the above specified duration. Any request for changes to the covered duration or work arrangement shall require prior approval of appropriate official.

☐ A. Flexi-Place

☒ 1. Work from home

☐ 2. Work from satellite office (e.g. RSSO, PSO, or any government office)
please indicate _____

☐ 3. Work from another fixed place (within the Philippines)
please indicate _____

☐ B. Compressed Workweek (4-day work week)

(only applicable for the whole Operating Unit where the intention is to save utility expenses; not applicable for frontline services)

Day Off Schedule *(please choose one day only)*

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ C. Skeleton Workforce (subject to directive by the proper authority)

☐ D. Work Shifting (Applicable to PhilSys Registry Office)

☐ E. Flexitime (On-site)

☐ F. Combination of Flexible Work Arrangements, please cite specifics _____

Requested by:

FRANCE ARTHUR T. TATING

Signature Over Printed Name of Employee

Recommended by:

IAN JOSHUA A. VILLAR

Information Technology Officer II
OIC, Geospatial Management Division

Approved by:

KRISTINE JOY S. BRIONES

Assistant National Statistician
Community-Based Statistics Service

* Pursuant to Office Memorandum No. 2019-109D dated 16 April 2022

Copy furnished:

____ HRD

