



Republic of the Philippines
Department of Environment and Natural Resources
MIMAROPA Region

Document Routing Slip

Document Number: P-2022-77851

Date Endocded: 13-Jan-2022

Sender: MARY JUNE F. MAYPA

Address: Calapan, Oriental Mindoro

Subject: MEMO DTD. JAN. 03, 2022 -RE: SUBMISSION OF ACCOMPLISHMENT REPORT OF PROVINCIAL ICT UNIT FOR THE 4TH QUARTER OF CY 2021

Addressee: Office of the Regional Executive Director

Attachment(s): Memorandum; 5 pages

Urgent: No; received by Records - Robert

Date Received: 13-Jan-2022

ROUTING AND ACTION INFORMATION				
FROM	DATE RECEIVED	FOR/TO	DATE RELEASED	ACCEPTANCE REMARKS/ACTION REQUIRED/TAKEN REMARKS/STATUS
RECORDS	2022-01-13	PMD	2022-01-13	Date: 2022-01-13 Status: OUT From: rtpanti Message: Memorandum forwarded for your information and appropriate action
	1-17-22	HCTU	1-17-22	For review, consolidation & inclusion in Annual Report 2021. ✓



Republic of the Philippines
Department of Environment and Natural Resources
MIMAROPA Region
Provincial Environment and Natural Resources Office

DENR MIMAROPA RECORDS SECTION
RECEIVED
13 JAN 2022
INCOMING ☒ OUTGOING ☐
BY: *[Signature]* DAYS NO. _____

January 03, 2022

MEMORANDUM

FOR : The Regional Executive Director
Roxas Blvd., Ermita, Manila

FROM : The PENR Officer
PENRO Calapan City, Or. Mindoro

SUBJECT : **SUBMISSION OF ACCOMPLISHMENT REPORT OF
PROVINCIAL ICT UNIT FOR THE 4th QUARTER OF
CY 2021**

Respectfully submitted herewith are the 4th quarterly accomplishments of ICT Unit of
PENRO Oriental Mindoro for CY 2021 on the following activities:

1. Maintenance of Network Infrastructure;
2. Maintenance of Functional Information Systems;
3. Maintenance of Functional Databases; and
4. Technical assistance to Offices on matters related to Information Technology.

For her information and record.

Mary June F. Maypa
MARY JUNE F. MAYPA



DENRPENR02201000020

Instructions:

A. Indicate the name of existing systems/applications developed within your office

B. Maintenance

B.1 - Indicate the maintenance activity taken by your office (Note: Keep record of activity taken such as screen shot, etc. for reference during validation)

B.2 - Indicate the date when the maintenance activity was taken

B.3 - Indicate other maintenance activity that is not included in the activities dropdown

C. Problems Encountered

C.1 - Describe the problems encountered (Note: Keep record of announcement/advisory, screen shot of error message, etc. for reference during validation)

C.2 - Indicate the date when the problem was encountered

C.3 - You may indicate other comments, notes, references, etc.

D. Action taken

D.1 - Describe the action taken by your office (Note: Keep record of recommendation given, patch files used, updates used, etc for reference during validation)

D.2 - Indicate the date when the action was taken

D.3 - You may indicate other comments, notes, references, etc.

Office/ Region/Bureau		Region 4B															
IS Database Maintenance Monitoring for the Quarter		4th Quarter (October - December)															
Central Office Implemented System		✓															
No.	(A) System/Application	(B) Maintenance		(C) Problems Encountered		(D) Action Taken											
		(B.1) Activities	(B.2) Date / Period	(B.3) Remarks	(C.1) Description	(C.2) Date / Period	(C.3) Remarks	(D.1) Description	(D.2) Date / Period	(D.3) Remarks							
Q4 - 2021																	
ORIENTAL MINDORO																	
1	Land Administration and Management System (LAMS)	Database Backup	End of Quarter				no problems encountered										
2	eBudget System	Database Backup	End of Quarter				no problems encountered										
3	Electronic National Government Accounting System (ENGAS)	Database Backup	End of Quarter				no problems encountered										

Prepared by:
RONALDO L. S. AREZ
Information Systems Analyst II

A	Indicate the name of existing systems/applications developed within your office
B	Indicate the name of the office's using the Information System (IS)
C	Indicate if the system is Operational (Yes/No); if No, specify the problems encountered (E).
D	Maintenance
D.1	Indicate the maintenance activity taken by your office (Note: Keep record of activity taken such as screen shot, etc. for reference during validation)
D.2	Indicate the date when the maintenance activity was taken
D.3	Indicate other maintenance activity that is not included in the activities dropdown
E	Problems Encountered
E.1	Describe the problems encountered (Note: Keep record of announcement/advisory, screen shot of error message, etc. for reference during validation)
E.2	Indicate the date when the problem was encountered
E.3	You may indicate other comments, notes, references, etc.
F	Action taken
F.1	Describe the action taken by your office (Note: Keep record of recommendation given, patch files used, updates used, etc. for reference during validation)
F.2	Indicate the date when the action was taken
F.3	You may indicate other comments, notes, references, etc.

Office/ Region/Bureau		Region 4B									
IS Maintenance Monitoring for the Quarter		4th Quarter (October - December)									
Central Office Implemented System		2021									
No.	(A) System/Application	(B) System/Application Users	(C) System/Application Operational?	(D) Maintenance (D.2) Date / Period	(D.3) Remarks	(E) Problems Encountered			(F) Action Taken		
						(E.1) Description	(E.2) Date / Period	(E.3) Remarks	(F.1) Description	(F.2) Date / Period	(F.3) Remarks
Q4 - 2021											

ORIENTAL MINDORO											
1	Enhanced Forestry Information System (aFIS)	MES/Planning Section/TSD/Office of the PENRO	Yes						data entry activity only		no problems encountered
2	Electronic National Government Accounting System (ENGAS)	Accounting	Yes						data entry activity only		no problems encountered
3	eBudget System	Budget	Yes						data entry activity only		no problems encountered
4	Land Administration and Management System (LAMS)	RPS	Yes						data entry activity only		no problems encountered

Prepared by:
RONALDO L. SUAREZ
Information Systems Analyst II


**Provincial Environment and Natural Resources Office
Sugui, Calapan City, Oriental Mindoro**

for the 4th Quarter of CY 2021

[illegible]

Prepared by:

RONALDO L. SUAREZ
Information Systems Analyst II

	Planning and Management Division (PMD)	Page No.	Page 1
	PENRO Information and Communication Technology Unit	Revision No.	1
	SERVICE REQUEST FORM (SRF)	Effectivity	04/01/2021

Reminder: Please complete this form and submit it at the PENRO Planning Section or email a scanned copy to penroomindoro@gmail.com. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No : _____ Date (mm/dd/yyyy): 16 / 4 / 21

Requester's Information	
Name: <u>MYLA GEMMA P. GAMBORA</u>	Title: _____
Office: <u>DETR- PENRO</u>	Building/Room/Flr: _____
Phone: <u>09999 703977</u>	Email Address: _____

Request Information

Type of request:

Technical Assistance

☒ Hardware ☐ Software ☐ Local Area Network ☐ Information Systems ☐ Databases

Database System Assistance (In-house)

☐ New User ☐ Change Password ☐ System Modification

Website

☐ Posting ☐ E-mail Assistance

Asset/Borrow

☐ Hardware Components ☐ Peripherals ☐ Tools

☐ Others (specify): _____

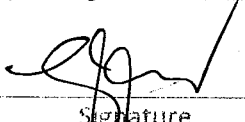
DESCRIPTION OF REQUEST(Please clearly write down the details of the request.)

Epson L220 printer for reset

Authorization

All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.

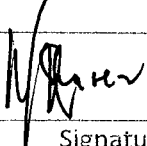
Full Name: MYLA GEMMA P. GAMBORA Position/Title: FT II / IN-CHARGE GSS / ITR

 16 / 01 / 21
Signature Date (mm/dd/yyyy):

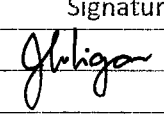
Infrastructure Service Authorization

All requests for service must be coordinated with and signed by the PMD Chief or his/her authorized representative.

Full Name: _____ Position/Title: _____

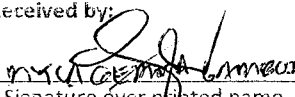
 16 / 1 / 21
Signature Date (mm/dd/yyyy):

For ICT Staff Only(Use Back of Form or Separate sheet if necessary)


Date	Time	Action Taken	Action Staff	Signature
<u>16/4/21</u>		<u>Check printer status, reset and setup printer</u>	<u>Jay Kaibigan</u>	

Feedback Rating: ☒ Excellent ☐ Very Satisfactory ☐ Satisfactory ☐ Unsatisfactory ☐ Poor

Released by:  JAY WILHELMS 16 / 4 / 21
Signature over printed name Date (mm/dd/yyyy)

Received by:  MYLA GEMMA P. GAMBORA 16 / 4 / 21
Signature over printed name Date (mm/dd/yyyy)

Excellent: 100% : Very Satisfactory: 90% Satisfactory: 80% Unsatisfactory: 70% Poor: 50%

	Planning and Management Division (PMD)	Page No.	Page 1
	PENRO Information and Communication Technology Unit	Revision No.	1
	SERVICE REQUEST FORM (SRF)		Effectivity

Reminder: Please complete this form and submit it at the PENRO Planning Section or email a scanned copy to penroomindoro@gmail.com. Once processed, a Technical Support Representative will contact you to schedule service.

Ticket No :

Date (mm/dd/yyyy): 10 / 21 / 2021

Requester's Information	
Name: <u>Florina L. Sison</u>	Title: <u>Front 11</u>
Office: <u>Ops Room</u>	Building/Room/Fir:
Phone: <u>0910626 8823</u>	Email Address:

Request Information	
Type of request:	
Technical Assistance <input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Local Area Network <input type="checkbox"/> Information Systems <input type="checkbox"/> Databases Database System Assistance (In-house) <input type="checkbox"/> New User <input type="checkbox"/> Change Password <input type="checkbox"/> System Modification Website E-mail <input type="checkbox"/> Posting <input type="checkbox"/> Assistance Asset/Borrow <input type="checkbox"/> Hardware Components <input type="checkbox"/> Peripherals <input type="checkbox"/> Tools <input type="checkbox"/> Others (specify):	

DESCRIPTION OF REQUEST(Please clearly write down the details of the request.)
<u>Repair of printer Epson L760</u>

Authorization	
All requests for service must be approved by the appropriate supervisor (at least division chief, OIC, immediate supervisor or next in rank staff) of the requester. By signing below the manager/supervisor certifies that the service is required.	
Full Name: <u>Florina L. Sison</u>	Position/Title: <u>Front 11</u>
<u>[Signature]</u>	<u>10 / 21 / 2021</u>
Signature	Date (mm/dd/yyyy):

Infrastructure Service Authorization	
All requests for service must be coordinated with and signed by the PMD Chief or his/her authorized representative.	
Full Name:	Position/Title:
<u>[Signature]</u>	<u>10 / 21 / 2021</u>
Signature	Date (mm/dd/yyyy):

For ICT Staff Only(Use Back of Form or Separate sheet if necessary)				
Date	Time	Action Taken	Action Staff	Signature
		Checked printer status, reset and update printer	Jay Kaibigan	<u>[Signature]</u>

Feedback Rating: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Satisfactory <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Poor

Released by: [Signature]
 Signature over printed name Date (mm/dd/yyyy): 10 / 21 / 2021

Received by: [Signature]
 Signature over printed name Date (mm/dd/yyyy): 10 / 21 / 2021

Excellent: 100% : Very Satisfactory: 90% Satisfactory: 80% Unsatisfactory: 70% Poor: 50%