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## SECURITIES AND EXCHANGE COMMISSION

SEC Building, EDSA, Greenhills, Mandaluyong City, Metro Manila, Philippines  
Tel: (632) 726-0931 to 39 Fax: (632) 725-5293 Email: [mis@sec.gov.ph](mailto:mis@sec.gov.ph)

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Sender Name	ATTY. ANNA GAYLE T. BARIN
Contact Information	045 4991714
Received From	Head Office
Department	Corporation Finance Department
Addressee	DEPARTMENT ACCOUNT - CFD
Subject	RE: PERMISSION TO ENGAGE IN LIMITED PRACTICE OF PROFESS
Document Type	Letter
Remarks	New

## COVER SHEET

C S 2 0 1 0 0 0 9 8 5

S.E.C. Registration Number

S F A S E M I C O N P H I L I P P I N E S

C O R P O R A T I O N

(Company's Full Name)

P A N D A Y P I R A A V E N U E C O R N E R C R E E

K S I D E R O A D C L A R K F R E E P O R T Z O N E

P A M P A N G A P H I L I P P I N E S

(Business Address: No. Street City/Town/Province)

Elena Joy M. Cavestany

Contact Person

045-499-1756

Company Telephone Number

1 2 3 1

Month Day

Fiscal Year

FORM TYPE

0 4 2 1

Month Day

Annual Meeting

n/a

Secondary License Type, If Applicable

Dept. Requiring this Doc.

n/a

Amended Articles Number/Section

Total Amount of Borrowings

Total No. of Stockholders

Domestic

Foreign

To be accomplished by SEC Personnel concerned

File Number

LCU

Document I.D.

Cashier

STAMPS

Remarks = pls. Use black ink for scanning purposes



February 21, 2018

**SECURITIES AND EXCHANGE COMMISSION**

Secretariat Building, PICC Complex,  
Roxas Boulevard, Pasay City, 1307

Attention: **ATTY. Rachel Ester Gumintang Romalante**  
Director  
Corporate Governance and Finance Department

Re: Permission to Engage in Limited Practice of Profession, Ms. Mary Delia  
G. Tomacruz


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Gentlemen:

In compliance with the requirements of the Securities and Exchange Commission, we submit herewith the Permission to Engage in Limited Practice of our Independent director, Ms. Mary Delia G. Tomacruz.

Thank you very much.

Very truly yours,

  
**Atty. Anna Gayle T. Barin**  
Corporate Lawyer

HRDO Form No. F-12 (2 copies)  
Revised 4.6.2001

**R E C E I V E D**  
**OFFICE OF THE CHANCELLOR**  
University of the Philippines Diliman  
Date: JAN 31 2018 Time: 5:45  
By: [Signature]  
**UNIVERSITY OF THE PHILIPPINES**

DUCAA JAN 30 '18 AM 11:48  
005398

**PERMISSION TO ENGAGE IN LIMITED PRACTICE OF PROFESSION**  
Period 01 January 2018 to 31 December 2018

For renewal of permission to engage in limited practice of profession / management of private enterprise, please attach a brief report of previous engagement covering the nature of the practice, the period covered (amount of time spent) and the clients / beneficiaries / institutions involved. Please accomplish in duplicate – HRDO 201 file and unit copy.

Last Name: TOMACRUZ		First Name: MARY DELIA	Middle Initial: G.
Designation:	<input checked="" type="checkbox"/> Faculty	<input type="checkbox"/> REPS	<input type="checkbox"/> Administrative
Position : <u>Associate Professor 7</u>			
Appointment Status:		<input type="checkbox"/> Temporary <input checked="" type="checkbox"/> Permanent	
Home College / Unit <u>College of Home Economics</u>		Contact No: +632 9220291, +6329818500	
Home Department <u>HRIM</u>		ext. 3410, +632 6242168	

**1. Nature of proposed practice of profession**

Profession practice (please specify):	<u>Policy Formulation and Analysis</u>
Commissioned creative work	Technical assistance
Policy analysis	Training
Program / Project evaluation	Others (please specify):
Research	<u>Independent Director</u>

**2. Amount of time to be spent in the practice of profession**

Time schedule (eg. 5 pm to 7 pm, W) Outside Office Hours

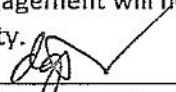
**3. Please indicate clients and where practice of profession will be done\*\*.**




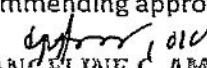
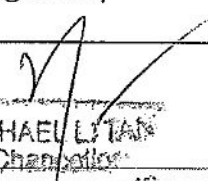
Organization / Clients	Address	Tel. / Fax No.
SFA Semiconductor Philippines Corporation	Clark Freeport Zone	+63-45-499-1996

\*\* Please include in your year-end report of engagement in limited practice of profession clients not covered by this application.

\* A separate request for teaching in other universities coursed through channels is required. Teaching in other universities shall be allowed only with institutions with which UPD has a MOA / MOU.

I hereby abide by the rules and regulations approved by the President and the Board of Regents governing limited practice of profession or involvement in outside activities. It is also understood that time while my engagement in limited practice of profession will further enhance and enrich my profession / scholarship in UP, such engagement will not in any way adversely affect my main duties as an employee of the University.

  
Signature of Applicant

1. Recommended by:  RAYMUND GERARDO GUERRERO Chair, DHRIM (Printed name and signature)	<u>1/12/18</u> Date
2. Endorsed by:  AURORITA T. ROLDAN Dean, CHE (Printed name and signature)	<u>22 Jan 2018</u> Date
3. Recommending approval: For Faculty & REPS  ROSELLA M. TORRECAS Director (Printed name and signature)	<u>30 Jan 18</u> Date
4. Recommending approval:  EVANGELINE C. AMOR, PhD Vice-Chancellor for Academic Affairs (Printed name and signature)	<u>30 Jan 2018</u> Date
5. Approved:  MICHAEL L. TAN Chancellor (Printed name and signature)	<u>FEB 2018</u> Date