



Office of Student LIFE



Activity Approval Form (A-Form)

REQUESTING ORGANIZATION		TITLE OF THE ACTIVITY	
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NATURE OF ACTIVITY

- | | |
|--|--|
| CSO & Special Groups
<input type="checkbox"/> Academic
<input type="checkbox"/> Special Interest
<input type="checkbox"/> Departmental Initiative
<input type="checkbox"/> Fundraising
<input type="checkbox"/> Community Development
<input type="checkbox"/> Organizational Development
<input type="checkbox"/> Issue Advocacy
<input type="checkbox"/> Lasallian Formation/ Spiritual Growth
<input type="checkbox"/> Outreach | USG
<input type="checkbox"/> Student Service
<input type="checkbox"/> Student's Rights & Welfare
<input type="checkbox"/> Rules and Policies
<input type="checkbox"/> Fundraising
<input type="checkbox"/> Community Development
<input type="checkbox"/> Organizational Development
<input type="checkbox"/> Issue Advocacy
<input type="checkbox"/> Lasallian Formation/Spiritual Growth
<input type="checkbox"/> Outreach |
|--|--|

TYPE OF ACTIVITY

- | | |
|--|--|
| Through CSO/ DAAM
<input type="checkbox"/> Assistance
<input type="checkbox"/> Awareness Campaign
<input type="checkbox"/> Contest
<input type="checkbox"/> Distribution
<input type="checkbox"/> Focus Group Discussion
<input type="checkbox"/> General Assembly / Recognition
<input type="checkbox"/> Meeting
<input type="checkbox"/> Recreation
<input type="checkbox"/> Recruitment / Audition / Election
<input type="checkbox"/> Seminar / Workshop
<input type="checkbox"/> Spiritual Activity
<input type="checkbox"/> Others: | Through SLIFE
<input type="checkbox"/> Concerts / Parties
<input type="checkbox"/> Donation Drive
<input type="checkbox"/> Fundraising Activity
<input type="checkbox"/> OCCS Sponsored Seminar
<input type="checkbox"/> Off- Campus Activities
<input type="checkbox"/> Outreach
<input type="checkbox"/> Tie-Up Activity (Internal/External)
<input type="checkbox"/> TV/Radio Guesting
<input type="checkbox"/> Seminar with Distinguished Speakers/Outside Participants
<input type="checkbox"/> Solicitations / Sponsorships
<input type="checkbox"/> Others: |
|--|--|

ACTIVITY DETAILS

DATE	TIME	VENUE	ENP	ENMP	Online Activity	<input type="checkbox"/> YES	<input type="checkbox"/> NO
REACH OF ACTIVITY:	<input type="checkbox"/> Batch Wide	<input type="checkbox"/> College Wide	<input type="checkbox"/> Organization Wide	<input type="checkbox"/> University Wide	Activity in GOSM	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Submitted By: _____

Noted by: _____

Signature Over Printed Name / Date and Time

Signature Over Printed Name / Date and Time

- Faculty Adviser USG Treasurer EB in Charge

Organization President / Date and Time

Signature Over Printed Name / Date and Time

- COSCA LSPO STRATCOM OCCS Safety Office

-----CSO/ DAAM/ SLIFE USE ONLY-----

Status	<input type="checkbox"/> Approved	<input type="checkbox"/> Pending	<input type="checkbox"/> Denied	<input type="checkbox"/> Please see me ASAP
Comments:				

Approved By _____

Date: _____ Time: _____

- SLIFE / Laguna Campus Coordinator
 CSO APS
 USG DAAM

IN CASE OF CHANGE

DATE: _____
TIME: _____
VENUE: _____

APPROVED BY: _____

- SLIFE / Laguna Campus Coordinator
 CSO EVCAD
 USG DAAM

POST ACTIVITY REQUIREMENTS

- | | |
|---|---|
| <input type="checkbox"/> Pre-Acts Requirements
<input type="checkbox"/> General Attendance Log Sheet
<input type="checkbox"/> Audited List of Expenses
<input type="checkbox"/> List of Pictures
<input type="checkbox"/> Approved Flyer / Poster
<input type="checkbox"/> Sample Publication
<input type="checkbox"/> FRA Report | <input type="checkbox"/> Income Statement
<input type="checkbox"/> List of Participants & Winners
<input type="checkbox"/> Signed MOA/s
<input type="checkbox"/> Minutes of the Meeting
<input type="checkbox"/> Activity Report
<input type="checkbox"/> Evaluation Results |
|---|---|

DUE DATE:	STATUS:

Date and Time:
Date and Time: