

CANCELLATION OF STUDENT ENGAGEMENT/OUTREACH FORM

Use this form for any COSCA student engagement/outreach related concerns. Return completed form to the Outreach Specialist of COSCA-UCED

PLEASE TAKE NOTE:

- 1. This form is submitted to COSCA only if CSO/USG intends to cancel prior arrangements with identified/partner community, NGO, LGU, etc.
- This form should be submitted to COSCA Outreach Specialist 5 working school days before set Outreach
 date/schedule with identified partner Community, NGO, LGU, CSO, etc. COSCA STRICTLY IMPLEMENTS THE 5WORKING SCHOOL DAY PRIOR CANCELLATION RULE!
- 3. This form should be signed by both Adviser and President in the case of CSOs and/or Project In-charge and USG President in the case of USGs.
- 4. Non-submission of form 5 days before student engagement/outreach **means**: CSO/USG intends to proceed with set engagement/outreach activity.
- 5. A notice of breach of commitment from Partner community, NGO, LGU, etc. will be given to CSO/USG in the case of **Cancellation without Notice**. The said notice will also be submitted to COSCA and SLIFE for possible intervention.

Name of CSO/USG				
Title of Outreach/Socio-Civic Project or Event				
Set Date of Outreach/Socio-Civic Project or Event				
Name of Partner Community, NGO, LGU, etc.				
Address of Partner Community, NGO, LGU, etc.				
Contact Details of Contact Person/s in Partner				
Community, NGO PO, LGU, etc.				
PLEASE CITE REASON/S FOR CANCELLATION	OF	ENGAGEMENT/OUTREACH	WITH	PARTNER
CONANGUATY NICO I CILI ETC				
COMMUNTY, NGO, LGU, ETC.				
COMMONTY, NGO, LGO, ETC.				
COMMUNITY, NGO, LGO, ETC.				
COMMONTY, NGO, LGO, ETC.				
COMMUNITY, NGO, LGO, ETC.				
COMMUNITY, NGO, LGO, ETC.				
COMMUNIT, NGO, LGO, ETC.				
COMMUNITY, NGO, EGU, ETC.				
COMMUNITY, NGO, EGO, ETC.				
COMMUNIT, NGO, LGO, ETC.				
COMMUNITY, NGO, EGO, ETC.				
COMMUNIT, NGO, LGO, ETC.				

Checked by: (For CSO Adviser or USG College	Form Accomplished &	[For COSCA only]
President only)	Submitted by: (For CSO President/USG	
Name/Signature:	Socio-civic in-charge only)	Received by:
ID Number (if Applicable):	Name/Signature:	Date:
Cell Number:	ID Number:	
Email Address:	Cell Number:	
Date Checked:	Email Address:	
	Date Filed at COSCA:	