



De La Salle University
Culture and Arts Office
Dear Student Artist/ Student Artist Manager and Parent/ Guardian,

Greetings of peace!

In order to strengthen the partnership between our office and the parents of student artist/ student artist managers, we have come up with the STUDENT ARTIST RECORD Notebook (STAR Notes) to keep track of all the off-campus waivers, academic absences (approved and non-approved), and their attitude/ability grades and attendances of your child while under our care. This particular record book should be maintained by your child throughout his/her stay with the Culture and Arts Office (CAO). However, it will be stationed at our office for safekeeping.

For your further knowledge in the development program and monitoring systems of CAO, we advise you to read the CAO Manual which can be found in this link: http://www.dlsu.edu.ph/offices/sps/cao/manual/cao_manual_1011.pdf. We hope you wouldn't mind filling up and signing some pages in this notebook as proof that you and your child fully agree and shall abide with the policies and processes of CAO and the university, as stated in the CAO Manual.

Thank you very much for entrusting your very talented child to us. We hope we could be close partners in his/her holistic development. Should you have any questions, you may email glorife.samodio@dlsu.edu.ph or fax at 524-4611, loc. 702 or 757. Thank you very much for your cooperation.

In St. La Salle,

Gl

MRS. GLORIFE SAMODIO
Director, Cultural Arts Office

Information read and understood by:

Printed name and Signature of Student _____ Printed name and Signature of Parent _____

WAIVER FORMS

The Cultural Arts Office manages events and supervises the deployment of student artists/ artist managers in out-of-campus performances. Through signing these waiver forms, you can keep track of the whereabouts of your children every time they have an activity (off-campus or overstay/overnight in campus). The official waiver form reprinted in this notebook signifies that you give your permission to your child in joining our activity. It is also therefore understood that:

1. Together with your son/ daughter, you know that the University and its officers, faculty, and staff are expected to exercise the legal diligence required for the safety and well being of your child for the duration and the place, date, and time of the activity as stated.
2. The legal diligence would include oral and written instructions, whether given before or during the activity, that if followed, would ensure the safety of your son/ daughter.
3. If your son/ daughter disregards or fails to follow these instructions or should act on his/ her own, you, together with your son/daughter, shall have no claims against the University its officers, faculty/ staff-in-charge should any damage be caused or liability be incurred to property or person.
4. If your son/ daughter fully understands that he/she is in an official activity of the university. Thus, he/she is expected to act in accordance with student discipline policies written in the Student Handbook.
5. That you are allowing your son/daughter to be picked up or to get off at a certain meeting place which is near your place of residence. You shall give this instruction when you fill up the space intended for this matter, in this form. Your son/daughter shall take full responsibility of him/herself upon disembarking your designated transportation.

If no parent or guardian could sign the waiver form (e.g. the student lives alone in Metro Manila) an authorization for the parents of these particular students should be accomplished once every year. The form is in the succeeding pages of this notebook. The authorization shall ask the parent for an appointment of a designated "adult", easily accessible to the student, to sign waiver forms on their behalf – they can be co-parents in the group, a distant relative, or the dorm manager. Please make sure that the person whom will be assigned as signatory is of legal age and can be easily accessed your child because these forms will have to be signed from time to time depending on the demand for performance or production requests. Kindly also talk to your assigned signatory of your instructions to him/her with regard to your parental policies/ concerns before they allow your child to join the activity.

Please also note the following information. Any other signature that you will see under the columns of faculty-in-charge and Director/Coordinator means that this information is tampered and that the activity is not legitimate. Please do not sign the waiver form unless all the boxes regarding the activity have entries. The email addresses above are official if the domain is "<username>@dlsu.edu.ph". Verification of details of this activity may be made through the official email addresses indicated below.

Name of Authorized Staff	Designation	Email address	Mobile No.	Specimen Signature
Glorife Samodio	Director	glorife.samodio@dlsu.edu.ph	09209284122	<i>Gl</i>
	Events Coordinator			
	Operations Coordinator			
	Trainer			

AUTHORIZATION

This is to authorize Mr. /Mrs. / Ms. _____, AUTHORIZED SIGNATORY _____, a _____ RELATION TO STUDENT _____ to sign the waiver form for off-campus activities on behalf of my son/daughter for the academic year _____.

I fully understand that by signing this form, I'm giving the full authority to the abovementioned person to decide on my behalf and that I fully trust /her judgment that my son/daughter's participation in these off-campus activities will benefit him/her, that he/she will ensure his/her safety upon before the departure and after the arrival of my child in the university.

Name and signature of Parent/Guardian _____ Name and signature of Authorized Signatory for waiver forms _____

Contact No.: _____ Contact no.: _____
Email add.: _____ Email add.: _____

NOTE: Please fill out the name/signature of Parent / Guardian and contact details even if you will not authorize another signatory so we may also be able to verify the validity of your permission for the student to the activity.

APPENDIX F. 2. INVENTORY LIST OF SUPPLIES

**DE LA SALLE UNIVERSITY
CULTURE AND ARTS OFFICE**

INVENTORY LIST OF SUPPLIES FROM _____ TO _____

NAME OF CAO GROUP

1st TERM: Inventory List of Supplies

ITEMS	QTY	DESCRIPTION	REMARKS

2nd TERM: Additional / Expended Inventory List of Supplies

ADDITIONAL

ITEMS	QTY	DESCRIPTION	REMARKS
			For.....

EXPENDED

ITEMS	QTY	DESCRIPTION	REMARKS
			Chipped
			Ink almost gone

3rd TERM: Updated List of Supplies

ADDITIONAL

ITEMS	QTY	DESCRIPTION	REMARKS
			For.....

EXPENDED

ITEMS	QTY	DESCRIPTION	REMARKS
			Chipped
			Ink almost gone

APPENDIX F. 3. INVENTORY LIST OF COSTUMES/ PROPERTY

Please make separate list for costumes and properties

**DE LA SALLE UNIVERSITY
CULTURE AND ARTS OFFICE**

INVENTORY LIST OF COSTUMES/PROPERTY FROM _____ TO _____

NAME OF CAO GROUP

1st TERM: Inventory List of Costumes /Property

ITEMS	QTY	DESCRIPTION	LOCATION	REMARKS
				Damaged , for repair
				Damaged, to be replaced
				Good condition
				Still quite good

2nd TERM : Additional / Existing Inventory List of Costumes

ADDITIONAL

ITEMS	QTY	DESCRIPTION	LOCATION	REMARKS

EXISTING

ITEMS	QTY	DESCRIPTION	LOCATION	REMARKS

3rd TERM: Additional / Existing Inventory List of Costumes

ADDITIONAL

ITEMS	QTY	DESCRIPTION	REMARKS

EXPENDED

ITEMS	QTY	DESCRIPTION	REMARKS
			Chipped
			Ink almost gone

APPENDIX F.4. MINUTES OF THE MEETING

Council of Company Managers
October 3, 2005
Minutes of the meeting

Attendees:

Ms. Jill Samodio – presiding officer Ms. Kim Edullantes Ms. Pam Jorolan
Mr. Fitzjavlad Lee Ms. Madella de Leon Mr. Mark Sarmiento
Ms. Nika Lapina Ms. Jad Deveza

- I. Attendance of members in seminars
 - a. Ms. Samodio asked the group for the possible reasons of poor attendance in CAO-prepared seminars. Below were the reasons given:
 - i. Conflict with other activities of the group and other organization
 - ii. Some said that it was due to late relay of information
 - iii. Rescheduling of the seminars is also a source of conflict
 - b. Ms. Samodio also noticed that a few attended the LTTs when there was already a make-up seminar for those who missed it. Below were the reasons given:
 - i. The same Saturday schedule still applied within the term, so those who missed it the first time still cannot attend the make-up class
 - ii. It was suggested to have the members view the documentation at their own available time.
 - c. To solve this problem, it was suggested that seminars may be held at the groups' rehearsal time to attain the desired attendance.
- II. Update on the CAO seat for student representation in the University's policy making, particularly in the yearly deliberation of tuition fees and discounts.
 - a. According to Ms. De Leon, a representative should submit to Chris Ngo and/or Army Padilla a letter regarding this concern of CAO having a seat.
 - b. CAO is included in their agenda for a yearly meeting, but nobody there knows what really are the needs. Ms. Samodio wants this as a move from the students, and not from her, since this is mainly a student concern.
 - c. There should be an established head of the ad hoc committee who will handle this endeavor.
 - d. Election of this officer will be done next meeting. Presentations will be needed.

Prepared by:

Fitzjavlad Lee

APPENDIX F.5. SAMPLE OFFICER'S CONTRACT

____ OFFICER'S COPY
____ DLSU-CAO'S COPY

I, (OFFICER'S NAME), of legal age fully and conditionally agree and bind myself to serve DE LA SALLE UNIVERSITY, INC. as (POSITION) of the (GROUP), under the auspices of the Culture and Arts Office (CAO) for the period covering SY 20__-20__, subject to the rights and obligations stipulated in the CAO Manual and my group's operations manual which I have carefully read and understood, such policies rules and regulations as are or may be promulgated by the office from time to time and subject further but not limited to the following:

1. I shall devote myself to the duties of a (POSITION) of the (GROUP), as set forth in the CAO Manual and group's operations manual including such amendments as may hereinafter be incorporated therein, and the job description and standards applicable to the Culture and Arts Office.
2. The term of this contract shall be for the period of one schoolyear, from April 18, 2006 to April 20, 2007, afterwhich this Contract shall automatically expire. I shall continue to serve my duties as member and officer should I graduate before this contract expires. That should I be inactive with the group without any permission by the trainer and Director, I shall bind myself to pay for the tuition discount I have previously received for my last two terms of stay, to be fully cleared for graduation.
3. I expressly warrant that, as of the signing hereof, I am not an Executive Board in any other student organization in DLSU-Manila and I will not do so during the existence of this agreement. Should I violate this specific provision even once, I fully and unconditionally agree and bind myself that I shall be dismissed from my position with and by the Culture and Arts Office. In consequence of and by reason of said dismissal I shall not hold the Office, its staff, trainer, and officers liable or answerable for the same.
4. I will attend all meetings, practices and performances and such other related activities at which my attendance is required or requested; and I shall duly inform my trainer, company manager and division manager for documentations if I will not be available at least two (2) days before the date.
5. The CAO Manual and my group's operational manual and such other rules and regulations as are or may hereinafter be promulgated are hereby accepted as part of this Contract. It is further agreed and accepted that it is my duty to read and acquaint myself of the provisions of the CAO Manual and such other rules and regulations aforementioned.
6. That my parents understand that all the performing arts trainings given by the Culture and Arts Office are for free except for some management and leadership/teambuilding trainings; that they allow me to join all activities (in-campus and off-campus) by the group for the whole SY 20__-20__, of which the officers are tasked to notify my parents regarding the details through a formal letter. That my parents fully understand that the school and its officers, faculty and staff are expected to exercise the legal diligence required for the safety and well-being of their child for the duration and on the place, date and time of activity as stated. This legal diligence would include oral or written instructions, whether given before or during the activity, would ensure my safety. That if I disregard or fail to follow those instructions or should act on my own, I, together with my parents, shall have no claim against the school, its officers, faculty/adviser/staff-in-charge/facilitator should any damage be caused or liability be incurred to property or person.
7. That should I violate any of the above-mentioned duties and conditions, the Culture and Arts Office has the right to immediately terminate my contract, by giving me written notice thereof.

BY:

Trainer, (GROUP)
Date Signed
Witnessed by:

BY:

(POSITION), (GROUP)
Date Signed

Officer's Parent /Guardian

GLORIFE SAMODIO
Director, Culture and Arts Office

APPENDIX F.6. SAMPLE MEMBERS' CONTRACT

____ MEMBER'S COPY
____ DLSU-CAO'S COPY

I, (MEMBER'S NAME), of legal age fully and conditionally agree and bind myself to serve DE LA SALLE UNIVERSITY, INC. as a member of the (GROUP), under the auspices of the Culture and Arts Office (CAO) for the period covering SY 20__-20__, subject to the rights and obligations stipulated in the CAO Manual and my group's operations manual which I have carefully read and understood, such policies rules and regulations as are or may be promulgated by the office from time to time and subject further but not limited to the following:

1. I shall devote myself to the duties of a member as set forth in the CAO Manual and group's operations manual including such amendments as may hereinafter be incorporated therein, and the job description and standards applicable to the Culture and Arts Office.
2. The term of this contract shall be for the period of one schoolyear, from April 18, 2006 to April 20, 2007, afterwhich this Contract shall automatically expire. That should I graduate earlier than the expiry date of this contract, I shall only serve the group until my last committed active term of which I shall duly inform my trainer, company manager and division manager for documentation.

IF A CHORALE MEMBER, PLEASE REVISE THE LAST SENTENCE OF THIS PROVISION TO THIS:: I shall continue to serve my duties as a member should I graduate before this contract expires. That should I be inactive with the group without any written notice to the trainer and Director, I shall bind myself to pay for the tuition discount I have previously received for my last two terms of stay, to be fully cleared for graduation.

3. I will attend all meetings, practices and performances and such other related activities at which my attendance is required or requested; and I shall duly inform my trainer, company manager and division manager for documentations if I will not be available at least two (2) days before the date.
4. The CAO Manual and my group's operational manual and such other rules and regulations as are or may hereinafter be promulgated are hereby accepted as part of this Contract. It is further agreed and accepted that it is my duty to read and acquaint myself of the provisions of the CAO Manual and such other rules and regulations aforementioned.
5. I am required to take a qualifying exam as a new member of the organization and should pass the said examination.
6. That my parents understand that all the performing arts trainings given by the Culture and Arts Office are for free except for some management and leadership/teambuilding trainings; that they allow me to join all activities (in-campus and off-campus) by the group for the whole SY 20__-20__, of which the officers are tasked to notify my parents regarding the details through a formal letter. That my parents fully understand that the school and its officers, faculty and staff are expected to exercise the legal diligence required for the safety and well-being of their child for the duration and on the place, date and time of activity as stated. This legal diligence would include oral or written instructions, whether given before or during the activity, would ensure my safety. That if I disregard or fail to follow those instructions or should act on my own, I, together with my parents, shall have no claim against the school, its officers, faculty/adviser/staff-in-charge/facilitator should any damage be caused or liability be incurred to property or person.
7. That should I violate any of the above-mentioned duties and conditions, the Culture and Arts Office has the right to immediately terminate my contract, by giving me written notice thereof.

BY:

Trainer, (GROUP)
Date Signed
Witnessed by:

BY:

Member, (GROUP)
Date Signed

Member's Parent /Guardian

GLORIFE SAMODIO
Director, Culture and Arts Office

APPENDIX F.7. APPLICATION FORM FOR OFFICERSHIP

DE LA SALLE UNIVERSITY CULTURE AND ARTS OFFICE

BASIC INFORMATION

NAME : _____ YR./ COURSE : _____

YRS. REMAINING IN DLSU: _____ THESIS TERM: _____

YR/ TERM GRADUATING: _____

WORK EXPERIENCE

POSITION/S BEING APPLIED FOR (according to priority):

1. _____
2. _____
3. _____

NO. OF TERMS IN THE GROUP: _____

CAO PRODUCTION/MANAGEMENT SEMINARS ATTENDED: _____

ATTENDED CAO BRIEFING AND ELECTION ORIENTATION: _____ YES _____ NO

PASSED THE EB EXAMINATIONS: _____ YES _____ NO

ACCOMPLISHMENTS AND INVOLVEMENTS IN THE GROUP:

ESSAY

WHY DO YOU THINK YOU SHOULD BE THE (POSITION) OF THE GROUP? WHAT CAN YOU OFFER TO THE MEMBERS AND THE GROUP?

SIGNATURE OF APPLICANT: _____

I certify that all the above information are true and correct. I understand that I will be disqualified for officership should there be any discrepancies in the information.

TO BE FILLED UP BY THE DIRECTOR/COORDINATOR:

20% Communication Skills : _____

40% Leadership Potential (based on his plans, principles and actions) : _____

40% Knowledge of the tasks assigned (depending on the position being applied for) : _____

TOTAL : _____

De La Salle University – Manila Culture and Arts Office

PERFORMANCE REQUEST FORM

No: _____
 CAO copy
 Client's copy

Please PRINT legibly and accomplish this form in duplicate.

DATE FILED : _____

TO : Culture and Arts Office
 SPS 404, Br. Connon Hall, DLSU-Manila

FROM : _____
 Name of Requesting Person

 Position and Department/Organization

I would like to invite a Culture and Arts Group to perform for this event that we are organizing. The details are as follows:

Title of the Activity: _____
 Date: _____ Day: _____ Time: _____ Venue: _____

Nature of the Activity
(Please check ✓ all that apply)

<input type="checkbox"/> Variety Show
<input type="checkbox"/> General Assembly
<input type="checkbox"/> Awarding Ceremony
<input type="checkbox"/> Seminar/Conference/Symposium
<input type="checkbox"/> Celebration
<input type="checkbox"/> Others:

Nature of Performance
(Please check ✓ all that apply)

<input type="checkbox"/> Invocation
<input type="checkbox"/> National Anthem (for Chorale or LYO only)
<input type="checkbox"/> Opening Number
<input type="checkbox"/> Intermission
<input type="checkbox"/> Closing Number
<input type="checkbox"/> DLSU Alma Mater Hymn
<input type="checkbox"/> Cocktails
<input type="checkbox"/> Emcee/Master of Ceremonies (for HTG)
<input type="checkbox"/> Choir for Mass
<input type="checkbox"/> Street Play
<input type="checkbox"/> Cultural Presentation
<input type="checkbox"/> Others:

Preferred group to be invited
(Please rank top 3 according to priority)

<input type="checkbox"/> LaSallian Youth Orchestra
<input type="checkbox"/> De La Salle Innersoul
<input type="checkbox"/> DLSU Chorale
<input type="checkbox"/> Harlequin Theatre Guild
<input type="checkbox"/> La Salle Dance Company – Folk
<input type="checkbox"/> La Salle Dance Company – Contemporary
<input type="checkbox"/> La Salle Dance Company – Street
<input type="checkbox"/> Suggest a Group for me

Activity Details
(Please check ✓ all that apply)

<input type="checkbox"/> College Wide
<input type="checkbox"/> University Wide
<input type="checkbox"/> Organization Wide
<input type="checkbox"/> Inter-School Activity
<input type="checkbox"/> Company Sponsored
<input type="checkbox"/> Others:

Performance Details

<input type="checkbox"/> # of performers preferred
<input type="checkbox"/> # of minutes allotted
<input type="checkbox"/> # of songs/dances
<input type="checkbox"/> Performance area (L x W)

Other Performance Specifications
(Theme/description of performance to be prepared)

Available equipment in the venue

Additional equipment willing to be provided by client
(Aside from the available equipment in the venue)

Response to request is needed on or before: _____

Please coordinate with: _____

You can reach him/her at: _____

Preferred Time for the Pre-Production Meeting: _____

Requests are honored only: 1) if received at least TWO (2) Weeks before the performance date, 2) if the client gives the program details together with the request, and 3) if this form is completely filled up. The CAO performing groups reserve the right not to grant the request on the day itself if there are any changes on the agreements during the production meeting not communicated 3 days before the event.

Please read the terms and conditions at the back.

**FEASIBILITY MEETING FORM (FM Form)
DE LA SALLE UNIVERSITY-MAHILA
CULTURE AND ARTS OFFICE
TALENT MANAGEMENT DIVISION**

Meeting Date _____
 Meeting Time _____
 Venue (specify if thru phone) _____
 Met with the following people from the requesting party _____

Client's Background

Name of Company/ Organization _____
 Name of Contact Person _____
 Contact Numbers _____

Activity Background

Nature of Activity _____
 Name of Activity _____
 Performance Time _____
 Venue _____

Performance Requirements of Client

Name of Performing Group _____
 Nature of Performance _____

Details/ Notes _____

Production Requirements of the Group

ITEMS	Group Standards (Qty./Size/, etc.)	Will be provided by client	Remarks
Sound System			
Channel Mixer			
Amplifiers			
Microphone			
Costume			
Lights/ Effects			
Platform Stage			
Conductor's Stand			
Piano			
Music Stand			
Chairs			
Transportation			
Food/drinks			

I understand that a Feasibility Meeting does not guarantee a granted performance request. This meeting only allows the Culture and Arts Office to study the request and make proper arrangements prior to the granting or denying of the request. Only through the PRC-1A Form (Performance Request Confirmation-1A Form) or the PRD-1 Form (Performance Request Denial-1 Form) can it be assured performance request is granted or denied.

If ever the performance is granted, I shall agree to abide the terms and conditions set by the Culture and Arts Office and the details as written in the Feasibility Meeting Form and Performance Request Form.

 Signature over Printed Name of Talent Manager Date Signature over Printed Name of Client Date

✕ _____
CONFIRMATION DETAILS

Confirmation Date and Time _____ **Venue (specify if thru phone)** _____

Printed Name and Signature of Contact Person _____

**PERFORMANCE REQUEST CONFIRMATION FORM-1B (PRC-1B FORM GROUP)
 DE LA SALLE UNIVERSITY
 CULTURE AND ARTS OFFICE
 TALENT MANAGEMENT DIVISION**

DATE _____
 TO _____
 PRINTED NAME OF TRAINER

 NAME OF PERFORMING GROUP
 THRU **MS. JILL S. SAMODIO**
 Director, Culture and Arts Office
 FROM _____
 NAME AND SIGNATURE OF CAO TALENT MANAGER
 RE YOUR GROUP'S GRANTED PERFORMANCE REQUEST

This is to inform you that your performance request for a Culture and Arts group has been granted for your activity. The final details are as follows:

CONFIRMED GROUP TO PERFORM _____
 TITLE OF THE ACTIVITY _____
 DATE AND DAY OF THE ACTIVITY _____
 TIME OF THE ACTIVITY _____
 VENUE OF THE ACTIVITY _____
 CALL TIME/PICK-UP VENUE (if applicable) _____
 PERFORMANCE TIME _____
 CONTACT PERSON FROM REQUESTING PARTY _____
 LIST OF PERFORMANCE NUMBERS _____
 (TITLE OF SONG/S, DANCE/S) _____

PRODUCTION MEETING IS ON _____
 *In the absence of a final production meeting, the agreements in the feasibility meeting shall apply.

LIST OF PRODUCTION REQUIREMENTS: (Based on feasibility/production meeting)

PROVIDED BY CLIENT	PROVIDED BY CAO GROUP
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Should there be any inquiries, concerns or difficulties with the arrangements, please do not hesitate to coordinate with me _____, your group's Talent Manager or Ms. Janeth Salceda. You can contact us at 524-4611 local 737 or 702 or you may visit us at Room 403-404, Bro. Cannon Hall.

Thank you and break a leg! ☺

**PERFORMANCE REQUEST CONFIRMATION – 1A FORM (PRC-1A Form-Client)
 DE LA SALLE UNIVERSITY- MANILA
 CULTURE AND ARTS OFFICE
 TALENT MANAGEMENT DIVISION**

DATE : _____

TO : _____
 Name of Requesting Person

 Position and Department / Organization

THRU : **MS. JILL S. SAMODIO**
 DIRECTOR, CULTURE AND ARTS OFFICE

FROM : _____
 Printed Name and Signature of Talent Manager

RE : CONFIRMATION OF PERFORMANCE REQUEST

This is to inform you that your performance request for a Culture and Arts group has been granted for your activity. The final details are as follows:

- CONFIRMED GROUP TO PERFORM _____
- TITLE OF THE ACTIVITY _____
- DATE AND DAY OF ACTIVITY _____
- TIME OF THE ACTIVITY _____
- VENUE OF THE ACTIVITY _____
- CALL TIME/ PICK UP VENUE OF THE _____
- GROUP (if applicable) _____
- PERFORMANCE TIME _____
- CONTACT PERSON FROM THE _____
- PERFORMING GROUP _____
- LIST OF PERFORMANCE NUMBERS _____
- (title of songs; dance/s) _____
- PRODUCTION MEETING IS ON _____

* In the absence of final production meeting, the agreements in the feasibility meeting shall apply.

LIST OF PRODUCTION REQUIREMENTS: (Based on feasibility/production meeting)

PROVIDED BY CLIENT	PROVIDED BY CAO GROUP
_____	_____
_____	_____
_____	_____

Should there be any inquiries, concerns or changes with the arrangements, please call _____, your Talent Manager or the CAO Secretary at least 3 days before the event. You can contact us at 5244611 local 737 or 702, or you may visit us at Room 403 – 404, Bro. Cannon Hall, 2401 Taft Avenue, Malate, Manila. Should there be changes not properly communicated to the concerned parties three (3) days before the event, the CAO group has the option of denying your granted request on the event day.

Thank you.

De La Salle University – Manila Culture and Arts Office

PERFORMANCE REQUEST EVALUATION SHEET

Dear Sir/Madam,

In our pursuit of continuously improving our services, the Culture and Arts Office (CAO) is doing a survey on the performance of our group and the service delivery of our talent managers. We hope that you can help us improve the quality of our shows through your honest evaluation. Please return your accomplished form to the CAO-SAM Talent Manager or to our secretary at SPS 404. Thank you very much for your time.

PLEASE ENCIRCLE THE ANSWERS USING THE SCALE:					
5-Outstanding 4-Very Satisfactory 3-Satisfactory 2-Needs Improvement 1-Poor N/A-Not Applicable					
ABOUT THE TALENT MANAGER			ABOUT THE PERFORMERS		
<p>1. Reliability in terms of quality and time of service delivery</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>The group arrived on time</p> <p>YES NO (If No, indicate the minutes delayed) _____</p>				
<p>2. Responsiveness to the needs of the Client (e.g. ability to suggest, negotiate, etc.)</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>1. Over-all Performance</p> <p>5 4 3 2 1</p> <p>N/A</p>				
<p>3. Competence in the knowledge of the booking and logistical components and processes</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>2. Artistic Direction</p> <p>5 4 3 2 1</p> <p>N/A</p>				
<p>4. Accessibility of the talent manager in case of queries and emergencies</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>3. Stage Presence</p> <p>5 4 3 2 1</p> <p>N/A</p>				
<p>5. Courtesy in dealing with the Client</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>4. Audience Impact</p> <p>5 4 3 2 1</p> <p>N/A</p>				
<p>6. Ability to effectively communicate the requirements to both the Client and requested parties.</p> <p>5 4 3 2 1</p> <p>N/A</p>	<p>5. Mastery of the Performance</p> <p>5 4 3 2 1</p> <p>N/A</p>				
<p>To be filled by the Talent Manager Only:</p> <p>Title of the Show: _____</p> <p>Performance Date/Time: _____</p> <p>Venue: _____</p> <p>AVERAGE PERFORMANCE SCORE: _____</p>			<p>To be filled by the Talent Manager Only:</p> <p>Title of the Show: _____</p> <p>Performance Date/Time: _____</p> <p>Venue: _____</p>		
<p>7. Voice Projection (for Music/Theatre groups only)</p> <p>5 4 3 2 1</p> <p>N/A</p>					
<p>8. Sound Precision (for Music/Theatre groups only)</p> <p>5 4 3 2 1</p> <p>N/A</p>					
<p>9. Spiels (for Music/Theatre groups only)</p> <p>5 4 3 2 1</p> <p>N/A</p>					
<p>10. Grace & Movement Precision (for Dance/Theatre groups only)</p> <p>5 4 3 2 1</p> <p>N/A</p>					

Comments :

Signature over Printed Name of Evaluator

Position & Dept./Org.

RT-001

De La Salle University – Manila Culture and Arts Office

PERFORMANCE EVALUATION SHEET FOR SELF-ORGANIZED SHOWS

Dear Patron,

In our pursuit of continuously improving our services, the Culture and Arts Office (CAO) is doing a survey on our audience and their responses to our shows. We hope that you can help us improve the quality of our shows through your honest evaluation. Please return your accomplished form to any CAO Students Artist Managers, ushers or to our secretary at SPS 404. Thank you very much for your time and enjoy the show!

Title of the Show: _____ Venue: _____
 Performance Date: _____ Time: _____

ABOUT YOU	
Please check the blanks corresponding to your answer	
1. Gender _____ Male _____ Female	6. Frequency of attendance on CAO shows in a term _____ 4 or more _____ 2-3 times _____ once
2. Age _____ 16 below _____ 21-22 _____ 31-35 _____ 46 above _____ 17-18 _____ 23-25 _____ 36-40 _____ 19-20 _____ 26-30 _____ 41-45	7. How did you know about the event? Check all that apply _____ word of mouth _____ posters _____ booth _____ calendar of activities _____ email _____ others
3. Occupation _____ Student _____ DLSU Staff/Admin/Faculty _____ Others (pls. specify) _____	8. Do you have friends/relatives in the show? _____ Yes _____ No
4. College/Office _____ COB _____ SOE _____ CLA _____ COE _____ CCS _____ COS _____ CED _____ CSB _____ Others (pls. specify) _____	9. Maximum price willing to pay for a show _____ below P100 _____ P151- P200 _____ P 101-150 _____ more than P200
5. Income/Allowance per month _____ under P4,000 _____ P8,001-P10,000 _____ P4,001-P6,000 _____ P10,001-P20,000 _____ P6,001-P8000 _____ P20,001 above	10. What are the CAO groups you regularly watch? _____ Lasallian Youth Orchestra _____ DLSU Chorale _____ Harlequin Theatre Guild _____ Innersoul _____ LSDC- Contemporary _____ LSDC- Street

ABOUT THE SHOW						
Pls. encircle the answer using the scale						
	5- Outstanding	4- Very Satisfactory	3- Satisfactory	2- Needs Improvement	1- Poor	N/A- Not Applicable
1. Over-all Performance	5	4	3	2	1	N/A
2. Artistic Direction	5	4	3	2	1	N/A
3. Stage Presence	5	4	3	2	1	N/A
4. Audience Impact	5	4	3	2	1	N/A
5. Mastery of the Performance	5	4	3	2	1	N/A
6. Script	5	4	3	2	1	N/A
7. Voice Projection (for Music/Theater groups only)	5	4	3	2	1	N/A
8. Sound Precision (for Music/Theater groups only)	5	4	3	2	1	N/A
9. Production Design (Set, Make-up, Props, Costume)	5	4	3	2	1	N/A
10. Grace & Movements (for Dance/Theater groups only)	5	4	3	2	1	N/A

Comments:

THANK YOU VERY MUCH FOR YOUR TIME! SEE YOU ON OUR NEXT SHOW!

APPENDIX F.14. PRODUCTION AND MEDIA SERVICES REQUEST FORM



We make things happen.
 _____ Green Media Group's Copy
 _____ Requesting Group's Copy

De La Salle University – Manila
 Culture and Arts Office
 PSMR – 1 No.: _____

PRODUCTION AND MEDIA SERVICES REQUEST FORM (PSMR-1)

Please PRINT legibly and accomplish this form in duplicate

Date filed : _____
To : **Green Media Group**
From : _____
Name of Requesting Person _____
Position and department/organization _____
Contact number of requesting person _____

I would like to request the production and media services of the Green Media Group for this certain event. The details are as follows:

Title of Activity: _____

Date: _____ Time: _____ Venue: _____

Target Audience (pls. specify if there will be VIPS and their names): _____

Objective/s of the Activity: _____

Type of Event: Awarding Ceremony Variety Show Exhibit Launch Party/Institutional Celebrations
 General Assembly Seminar/ Symposium Others: _____

Activity Details: College Wide Organization Wide Company sponsored
 University Wide Inter-school Activity Others: _____

PRODUCTION AND MEDIA SERVICES

(Please check all the services that you need on the left side of the service needed)

Audio Visual Production	Hosting	Stage Management
<input type="checkbox"/> Motion Graphics	<input type="checkbox"/> Hosting	<input type="checkbox"/> Stage Manager
<input type="checkbox"/> Video Conceptualization	<input type="checkbox"/> Master of Ceremony (MC)	<input type="checkbox"/> Assistant Stage Manager/s
<input type="checkbox"/> Video Shoot	<input type="checkbox"/> Moderator	<input type="checkbox"/> Production Assistant/s
<input type="checkbox"/> Video Transfer	<input type="checkbox"/> Voice Over	<input type="checkbox"/> Runner/s
<input type="checkbox"/> Video Editing	Production Design	<input type="checkbox"/> Usher/s
<input type="checkbox"/> DVD Authoring	<input type="checkbox"/> Set Designer	<input type="checkbox"/> Fly operator/s
<input type="checkbox"/> Basic Sound Editing	<input type="checkbox"/> Set Executioner	Technical Direction
<input type="checkbox"/> AVP / Powerpoint Handler	<input type="checkbox"/> Make-up Artist	<input type="checkbox"/> Technical Director
Creatives	<input type="checkbox"/> Costume Designer	<input type="checkbox"/> Lights Designer
<input type="checkbox"/> Brochure Design	<input type="checkbox"/> Props Designer	<input type="checkbox"/> Lights Operator
<input type="checkbox"/> Calling Card Design	<input type="checkbox"/> Props Executioner	<input type="checkbox"/> Assistant Lights Operator
<input type="checkbox"/> Logo Design		<input type="checkbox"/> Sounds Operator
<input type="checkbox"/> Poster Design	Scriptwriting	<input type="checkbox"/> Assistant Sounds Operator
<input type="checkbox"/> Streamer Design	<input type="checkbox"/> Scriptwriting for Events	<input type="checkbox"/> Spot Operator/s
<input type="checkbox"/> Ticket Design	<input type="checkbox"/> Scriptwriting for AVPs	Coverage
<input type="checkbox"/> Web Design	<input type="checkbox"/> Script Editing	<input type="checkbox"/> Photo (Documentation)
<input type="checkbox"/> Designing Merchandising	<input type="checkbox"/> Script Supervisor	<input type="checkbox"/> Photo (Pictorial)
<input type="checkbox"/> Materials		<input type="checkbox"/> Video (Master)
<input type="checkbox"/> (T-shirts, pins, mugs, etc.)		<input type="checkbox"/> Video (Roving)

Requests are honored only 1) if received within the prescribed timetable as stated below, 2) if the client gives the program details together with the request or a week after the request, and 3) if this form is completely filled up. GMG reserves the right not to grant the request on the day itself if there are any changes on the agreements during the production meeting not communicated three (3) days before the event.

Type of Request	No. of Working Days
Audio Visual Production	35
Coverage	14
Creatives	28
Hosting	10

Type of Request	No. of Working Days
Production Design	12
Scriptwriting	20
Stage Management	28
Technical Direction	28



De La Salle University-Manila Cultural Arts Office
 PMSF No. _____
 PMSR-1 No. _____

we make things happen:
 Green Media Group's Copy
 Requesting Group's Copy

PRODUCTION AND MEDIA SERVICES FEASIBILITY MEETING FORM (PMS-F)

MEETING DATE/TIME: _____ VENUE: _____
 PRESENT (FROM CLIENT): _____
 (FROM GMG): _____
 NAME OF ACTIVITY: _____ NATURE OF ACTIVITY: _____
 ACTIVITY TIME: _____ CALL TIME: _____ VENUE: _____
 AUDIENCE: Students Faculty Administration Parents Others (Pls. specify)

SHOW

OVER-ALL DIRECTION: Brief description of the activity concept and the over-all artistic direction from Client's point of view

NAME/S OF LIVE PERFORMERS, GUESTS, HOSTS (If from client): _____

Final date of confirmation: _____

SOUNDS SPECIFICATIONS:

Voice-Over: _____ Music Filters: _____
 Music to be used according to program flow: _____

Sponsors' Angles or Radio Ad to be played (include order and no. of times to be played): _____

ITEMS	DETAILS BASED ON CAO STANDARDS (for CAO performers, sound technicians)	C/O CLIENT	REMARKS
Sound System			
Channel Mixers			
Amplifiers			
Microphones			
Conductor's Stand			
Music Stands			
Planal Keyboard/Guitar			
Chairs			

Date of finalization: _____

LIGHTS SPECIFICATIONS:

Over-all feel/mood of the show: _____
 Description per segment: _____

LCD Projector/VCD/ VHS/ PPT): _____

ITEMS	DETAILS BASED ON CAO STANDARDS (for CAO performers, sound technicians)	C/O CLIENT	REMARKS
Lighting theatre			
LCD Projector			
VHS Player			

APPENDIX F.16. PRODUCTION AND MEDIA SERVICES CONFIRMATION FORM



De La Salle University-Manila Cultural Arts Office
 PMSF No. _____
 PMSR-1 No. _____

we make things happen
 Green Media Group's Copy
 Requesting Group's Copy

PRODUCTION AND MEDIA SERVICES REQUEST CONFIRMATION FORM (PMSR-C)

Please PRINT legibly and accomplish this form in duplicate.

DATE FILED : _____
 FOR : _____
 NAME OF REQUESTING PERSON

 POSITION AND DEPARTMENT/ORGANIZATION
 THRU : MS. JILL SAMODIO
 Director, Cultural Arts Office
 FROM : _____

This is to inform you that your request for the Green Media Group's Services has been granted. The details are as follows:

Title of Activity: _____ Date and Time: _____ Venue: _____
 Call Time: _____ Contact Person: _____ Contact No.: _____

AGREEMENTS:

SHOW	
AREAS	REMARKS (Specifications/Timings)
Over-all Direction	
Lights	
Props	
Production Menpower to be provided	
Set Design/Execution	
AVP /PPT	
Script	
Heats	
Styling	
Others	

AUDIO-VISUAL PRESENTATIONS	
AREAS	REMARKS (Specifications/Timings)
Concept	
Storyboard	
Script	
Musical Scoring	
Editing	
Shooting	
Styling (Costumes/Make-up)	
COVERAGE	
Photo Coverage (type of camera, output, # of shots eq't. needed)	
Video Coverage (type of output, length of film, eq't. needed)	

DESKTOP PUBLISHING	
AREAS	REMARKS (Specifications/Timings)
Poster	
Streamer	
Logos	
Merchandising	
Ticket	
Brochure	

NOTES:

Food: _____
 Transportation: _____
 Equipment/Props/Costume: _____
 Others: _____



De La Salle University – Manila Culture and Arts Office

PRODUCTION AND MEDIA SERVICE REQUEST EVALUATION SHEET

Dear Sir/Madam,

In our pursuit of continuously improving our services, the Culture and Arts Office (CAO) is doing a survey on the performance of our group and the service delivery of our officers. We hope that you can help us improve the quality of our shows through your honest evaluation. Please return your accomplished form to the CAO-GMG VP-External or Internal or to our secretary at SPS 404. Thank you very much for your time.

PLEASE ENCIRCLE THE ANSWERS USING THE SCALE: 5-Outstanding 4-Very Satisfactory 3-Satisfactory 2-Needs Improvement 1-Poor N/A-Not Applicable					
ABOUT THE VP-EXTERNAL/VP-INTERNAL			ABOUT THE ASSIGNED GMG TEAM		
1. Reliability in terms of quality and time of service delivery 5 4 3 2 1 N/A	The group arrived on time YES NO (If No, indicate the minutes delayed)_____				
2. Responsiveness to the needs of the Client (e.g. ability to suggest, negotiate, etc.) 5 4 3 2 1 N/A	1. Over-all Performance 5 4 3 2 1 N/A				
3. Competence in the knowledge of the booking and logistical components and processes 5 4 3 2 1 N/A	2. Artistic Inputs 5 4 3 2 1 N/A				
4. Accessibility of the talent manager in case of queries and emergencies 5 4 3 2 1 N/A	3. Team Initiative 5 4 3 2 1 N/A				
5. Courtesy in dealing with the Client 5 4 3 2 1 N/A	4. Mastery of Cues 5 4 3 2 1 N/A				
6. Ability to effectively communicate the requirements to both the Client and GMG 5 4 3 2 1 N/A	5. Production Design (Set, Make-up, Props, Costume) 5 4 3 2 1 N/A				
<div style="border: 1px solid black; padding: 5px;"> To be filled by the VP-External/VP-Internal only: Title of the Show: _____ Date/Time: _____ Venue: _____ AVERAGE PERFORMANCE SCORE: _____ </div>			6. Lights Design 5 4 3 2 1 N/A		
<div style="border: 1px solid black; padding: 5px;"> To be filled by the VP-External/VP-Internal only: Title of the Show: _____ Date/Time: _____ Venue: _____ AVERAGE PERFORMANCE SCORE: _____ </div>			7. Sound Precision 5 4 3 2 1 N/A		
<div style="border: 1px solid black; padding: 5px;"> To be filled by the VP-External/VP-Internal only: Title of the Show: _____ Date/Time: _____ Venue: _____ AVERAGE PERFORMANCE SCORE: _____ </div>			8. Hosts' Performance 5 4 3 2 1 N/A		
<div style="border: 1px solid black; padding: 5px;"> To be filled by the VP-External/VP-Internal only: Title of the Show: _____ Date/Time: _____ Venue: _____ AVERAGE PERFORMANCE SCORE: _____ </div>			9. Audio-Visual Presentation/Coverage Output 5 4 3 2 1 N/A		
<div style="border: 1px solid black; padding: 5px;"> To be filled by the VP-External/VP-Internal only: Title of the Show: _____ Date/Time: _____ Venue: _____ AVERAGE PERFORMANCE SCORE: _____ </div>			10. Desktop Publishing Output 5 4 3 2 1 N/A		

Comments :

Signature over Printed Name of Evaluator

Position & Dep't/Org.

De La Salle University
Cultural Arts Office

TO : SECURITY OFFICE
THRU : ENGR. AURELLANO O. DE LA CRUZ
AVP for Campus Development
MS. GLORIFE S. SAMODIO
Director, Cultural Arts Office

FR : _____
Name

Position/Group

RE : Entry Permit

Please be informed that _____ is expecting the
Name of Group

following guest / visitor on _____
Date & Time

PURPOSE: _____

<i>Name of Visitor (s)</i>	<i>Institution / Company Represented</i>
_____	_____
_____	_____
_____	_____

Also they will be bringing some materials (please specify): Attach sheet if necessary.

_____	_____
_____	_____
_____	_____

Please direct them to : _____

Thank you.

(Pls. file in duplicate)

CULTURE AND ARTS OFFICE
De La Salle University-Manila

Rehearsal Hall Reservation Form

Please PRINT or TYPE legibly.

DATE FILED _____

TITLE OF ACTIVITY _____

NATURE OF ACTIVITY _____

DATE OF ACTIVITY _____

DURATION/TIME OF ACTIVITY _____

NAME OF PERSON REQUESTING _____

CONTACT NUMBER _____

NAME OF GRP/UNIT/ORG/DEPT _____

PURPOSE OF ACTIVITY _____

Guidelines:

1. Do not put posters on the walls to advertise activity.
2. After the activity, check if aircons/electric fans and lights are properly switched off, the room is clean, the windows are closed and the doors are locked.
3. **SMOKING, EATING** and **PDI** inside and outside the rehearsal hall are **STRICTLY PROHIBITED**.
4. Violations in any of the said guidelines will be dealt accordingly.
5. The requesting person presents the approved reservation form to CAO to get key at least fifteen (15) minutes before the scheduled activity. Official ID is needed in exchange of the key. Return key immediately after opening the rehearsal hall.
6. In cases where any CAO personnel is not available, most especially for activities after office hours, the requesting person can go directly to the Physical Facilities Office (PFO) and look for Mr. Arnel Avila, to have the hall open. The requesting person is expected to present the approved reservation form to PFO.

I hereby certify that all information written above are true and correct. I understand that by not filling up this form completely, I will forfeit my chance of processing this reservation form. If granted, I understand I am responsible for abiding by the guidelines stated herewith. And if any violation of the guidelines occur, I will have to accept and take the consequences given by CAO.

Signature of Requesting Person

FOR CAO USE ONLY

The abovementioned request has been ___ granted ___ denied by the Culture and Arts Office (CAO).

Date of request granted/denied: _____

Noted by:

Secretary, CAO

Coordinator/ Director, CAO

APPENDIX F.20. BUILDING GROUNDS & MAINTENANCE FORM

BUILDING & GROUNDS MAINTENANCE

REQUEST FORM

Requested by : _____
 Date : _____
 Department : _____
 Loc. Phone# : _____
 Request : () Movers
 () Janitorial Services
 () Beautification
 Details : _____

 Date/Time
 Needed** : _____

* Overtime will be charged to requestor's department.
 ** Request must be made at least 2 days before needed.

Approved by: _____

APPENDIX F.21. VIOLATION FORM

DATE: _____

TO: _____
 Company Manager, _____

THRU: MS. JILL SAMODIO
 Director, Culture and arts Office

FROM: _____
 Student Artist Manager

RE : VIOLATION REPORT

CC : Trainer / File

This is to notify that your group/ member _____ has incurred a violation regarding:

- Financial management policies Production /Project Management policies
 Marketing Management policies Process Management policies
 Human Resource policies Code of Ethics

REMARKS:

Please be reminded of the corresponding deductions in your group grade in the Arts Quality Assurance System and the Attitude and Ability grade of the officer/ member responsible.

APPENDIX F.23. REQUEST FOR ADVANCE SPECIAL EXAM

DATE: _____

REQUEST FOR ADVANCE SPECIAL EXAMS

NAME OF REQUESTING STUDENT: _____

ID NO: _____

CAO GROUP NAME: _____

ROLE IN THE PRODUCTION: _____

EXACT TASK THAT WILL BE DONE ON THE ORIGINAL TIME AND DATE OF THE EXAM:

NAME OF FACULTY: _____

NAME OF FACULTY'S DEPARTMENT: _____

NAME OF SUBJECT & SECTION: _____

TIME/ DAY OF THE CLASS: _____

ORIGINAL DATE OF EXAM (put the date on the nature of the exam missed):

Quiz (Indicate if surprise or announced) _____

Long Test: _____

Midterm Exam: _____ Final exam: _____

PREFERRED DATE OF EXAM: _____

IMPORTANT NOTE: If the exam missed was a surprise quiz, the student should go to the faculty the moment he/she learns about the quiz and ask if he/she may be given a make-up quiz. A letter will only be prepared upon the approval of the teacher to give a make-up quiz. If the exam missed was announced, the student cannot use this form if the date of request has already passed the original date of the exam. The letter of request that will be prepared by CAO will only be for exams that will be taken AHEAD of the original test date. Please give CAO at least one day to prepare your letter, and give the accomplished letter from CAO to your teacher, at least 2 days before your exams.

SIGNATURE OF TRAINER: _____

APPENDIX F.24. CALL SLIP FOR OFF CAMPUS ACTIVITIES

**CULTURE AND ARTS OFFICE
OFFICIAL CALL SLIP FOR
OFF CAMPUS ACTIVITIES**

NAME: _____

CAO GROUP: _____

ACTIVITY NO: _____

DATE: _____

TITLE OF ACTIVITY: _____

PLACE OF ACTIVITY: _____

TIME OF ACTIVITY: _____

DEPARTURE DATE & TIME @ DLSU: _____

ARRIVAL DATE & TIME @ DLSU: _____

PERSON IN CHARGE/ SIGNATURE: _____

CELL NO: _____



De La Salle University – Manila Culture and Arts Office

SAM Copy
 Group's Copy

HOUSE MANAGEMENT REQUEST FORM

Please PRINT legibly and accomplish this form in duplicate.

DATE FILED : _____

TO : STUDENT ARTIST MANAGERS

FROM : _____
 Name of Requesting Person

 Position and CAO Group

I would like to request the house management services of the Student Artist Managers for this event. The details are as follows:

Title of the Activity: _____ Date: _____ Time: _____

Venue: _____ Expected Number of Audience: _____

Number of SAM's to be Requested*: _____ Attire: _____

✓ Designation	Number
Doors	
Aisles	
Balcony I	
Balcony II	
Registration	
Ticket Sales (Venue Lobby)	
Ticket Sales (South Gate)	
Service Elevator	
Passenger Elevator Lobby	
Others:	

Response to request is needed on or before: _____

Please coordinate with: _____

You can reach him/her at (mobile number and email address): _____

Preferred Time for the Feasibility Meeting: _____

* Final number and designations of house management staff are subject to details discussed at the feasibility meeting

Requests are honored only: 1) if received at least two (2) weeks before the activity date, 2) if the CAO group gives/discusses the program details together with the request or a week after the request, 3) if this form is completely filled up. SAM's are understood to be present at the venue at least one and a half hours before the show begins. This is to comply with the "bompany call one hour before show" policy. Registration tables, chairs, and attendance sheets are to be provided by the requesting group.

APPENDIX F.26. LEARNING BY DOING ACCREDITATION FORM

October 21, 2005

MS. JILL SAMODIO
 Director, Culture and arts Office

Dear Ms. Samodio,

Greetings in St. La Salle!

The (CAO GROUP) would like to apply for the accreditation in the Salesmanship/ MARKET2 Learning by Doing Program for the ___ term of SY _____ through selling our tickets for their artistic performances.

We shall comply with the requirements as stated in the program guidelines. We also commit to submit our marketing plan, product positioning, target market, and other pertinent information to the students at the start of the term. Moreover, we shall also submit regular monthly reports of individual students' performance indicating the following information and to deliver the requisite supply of products as ordered by students. Below is a sample of our ticket and a table indicating gross selling prices to customers, net selling prices to students, applicable mark-ups for each item and terms of sale, and compensation scheme.

TICKETS	GROSS SELLING PRICE TO CUSTOMERS	NET SELLING PRICES TO STUDENTS	MARK-UP	TERMS OF SALE	INCENTIVE SCHEME
Orchestra	P 120.00	P100.00	P20.00	Payable in 15 days after receipt of ticket	For every 10 pcs. sold, 1 free ticket
Balcony I					
Balcony II					

I will be the contact person/representative of our office for this project. Our office is at Rms. 403 or 404 Br. Connon Hall, and our local nos. are 702 or 737. Should you have any questions, you can call me at the abovementioned numbers. Hoping for your kind response on this matter. Thank you very much.

Very truly yours,

Noted by:

Approved by:

DM-Marketing

DM-Finance

Company Manager Trainer

APPENDIX F.27. SAMPLE MONTHLY SALES REPORT

GROUP NAME:

Date Sold	Seller (Name of Student)	ID Number	Subject/ Section	Item Description	No. of pcs/ Units	Unit price	Total price	Profit
TOTAL								

APPENDIX F.28. ELECTRONIC MESSAGE FORM

DE LA SALLE UNIVERSITY-MANILA Marketing Communication Office Board Announcement Request Form	
Name: _____	Position: _____
Department/Office: _____	Contact #: _____
Announcement Board: <input type="checkbox"/> Central Bulletin Board (Central Plaza) <input type="checkbox"/> Electronic Billboard (South Gate) <input type="checkbox"/> Electronic Message Board (Central Plaza)	
<i>(For Electronic Billboard and Electronic Message Board only)</i> Event Announcement: Date: _____ Nature of Event: _____ Title of Event: _____ _____ Presenter: _____ Position: _____ Time: _____ Venue: _____ Sponsor/s: _____	
Recognition Announcement: Name: _____ Position: _____ Recognition/Award: _____ Award Giving Body: _____	
Others: (Please Specify) _____ _____	
Attachments: (Please Specify) _____ _____	
Important Reminders: 1. Accomplish two copies of the form, for your department/office and MCO reference. 2. Attach relevant support documents such as invitations and programs. 3. Deadline of submission of announcements is two days before intended date of display. 4. Requests will only be received Mondays-Fridays from 2 to 5 p.m. 5. MCO reserves the right to approve or disapprove request(s). 6. The Boards are properties of DLSU-Manila and available for use of DLSU-Manila only.	

Approved by: _____
 Printed Name and Signature

APPENDIX F.29. PUSO FUNDING REQUEST FORM

Funding Request Form



Date of request			
Name of Organization			
Title of Activity			
Date of Activity		Time of Activity	
Venue of Activity			
Expected number of participants	<input type="checkbox"/> Organization-wide <input type="checkbox"/> College-wide <input type="checkbox"/> University-side <input type="checkbox"/> Others (Please specify)		
Expected beneficiaries			
Objectives of the Activity:			
Justification:			
Details of Request			
	Particulars	Quantity	Unit Cost
1.			
2.			
3.			
4.			
Total amount requested			
Note: 1. You may add additional sheets if necessary. 2. Please attach official quote of the items being sponsored.			
Requested by:	Name, Position, Office		
Noted by:	Office Director / Unit Head	Academic Dean / Dean of Student Affairs	
(To be filled out by PUSO)			
Date Received by PUSO		Received by:	
Action taken:	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Board Resolution #	
Amount:		Date of Resolution:	
Details of Check		Check received by:	
		Date received:	

Please accomplish in quadruplicate form. Three (3) copies to PUSO

PUSO Form No. ____ August 2009

