UNIVERSITY OF THE PHILIPPINES MINDANAO



School of Management

SOM OD Form2 version1 S2024

REQUEST FOR USE OF ROOM

1.	Date	of Request:				
2.	Requ	esting Party:	Faculty _	Student _	Admin Staff/REPS	
3.	Room	to be used: _	C6 C	5 Office	of the Dean	
4.	Purpose of Room Use:					
5.	Date of Room Use: 6. Time:					
6.	Guidelines for Room Use					
	6.1	-		ovide the Secu	rity Guard a copy of the approved	
	6.2	room use requ			a magazagta dan dan magaza dhayan	
	6.2 6.3					
	6.4					
	6.5	-	0 1 0		niversity property will be damaged.	
	6.6 The requesting party is responsible in cleaning up the room after use regardless of time.					
	6.7				ent, the requesting party must inform Fore the date of event to give way to	
7.	Name	Name of Requester: Signature over printed name				
		-	Signature ov	er printed na	ne	
	M	lobile Number	•			
	E	mail Address:				
8.	Endorsed by (if applicable): Signature over printed name/Designation					
9.	Clear	ance for Roon	n Use:			
	Conforme of Faculty College Secretary					
	(whose class will be in conflict					
	with th	e requested date/ti	ime of use)			
10	Annr	oved/Disappro	ved•			
10.	. դրիւ	ovcu/Disappi o	·····	Dean		

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