

**UNIVERSITY OF THE PHILIPPINES  
MINDANAO**  
School of Management



SOM OD Form2  
version2 S2025

**REQUEST FOR USE OF ROOM**

1. **Date of Request:** \_\_\_\_\_
2. **Requesting Party:** \_\_\_ Faculty \_\_\_ Student \_\_\_ Admin Staff/REPS
3. **Room to be used:** \_\_\_ C3 \_\_\_ C5 \_\_\_ Office of the Dean
4. **Purpose of Room Use:** \_\_\_\_\_  
\_\_\_\_\_
5. **Date of Room Use:** \_\_\_\_\_ **6. Time:** \_\_\_\_\_
6. **Guidelines for Room Use**
  - 6.1 The requesting party must provide the Security Guard a copy of the approved room use request form.
  - 6.2 The requesting party must not go beyond the requested and approved hours.
  - 6.3 The requesting party must ensure that all borrowed equipment are returned immediately after use.
  - 6.4 The requesting party must be responsible in turning off the lights, air-conditioning unit(s) and other devices inside the room after use.
  - 6.5 The requesting party must ensure that no University property will be damaged.
  - 6.6 The requesting party is responsible in cleaning up the room after use regardless of time.
  - 6.7 In case of postponement/cancellation of event, the requesting party must inform the SOM at least three (3) working days before the date of event to give way to other users.
7. **Name of Requester:** \_\_\_\_\_  
**Signature over printed name**  
  
**Mobile Number:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_
8. **Endorsed by (if applicable):** \_\_\_\_\_  
**Signature over printed name/Designation**
9. **Clearance for Room Use:**  
  
\_\_\_\_\_  
**Conforme of Faculty**  
(whose class will be in conflict  
with the requested date/time of use)  
  
\_\_\_\_\_  
**College Secretary**
10. **Approved/Disapproved:** \_\_\_\_\_  
**SOM BLDG ADMINISTRATOR**