

	STUDENT ACTIVITY APPLICATION FORM	Document No: FM-SA-14-01
		Effective Date: March 1, 2024

☐ CO-CURRICULAR ACTIVITY ☐ EXTRA-CURRICULAR ACTIVITY	☐ MAJOR ACTIVITY ☐ MINOR ACTIVITY	TOTAL NUMBER OF CLASS/ORG MEMBERS: _____
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APPLICANT INFORMATION:

Name of Applicant & Student #:	Program and Year:
Date of Submission of Form:	Position of the Applicant:
Name of Organization / Course and Section:	

DETAILS OF ACTIVITY:

Title and Nature of Activity applied for: _____
(i.e. Seminar, Field Trip, Plant Visit, Outing, Socials, Assembly, Meeting, etc.)

Objectives of the Activity: _____

Venue: _____
(Write the complete address for off-campus activity)

Date: _____ Day: _____ Time: _____

Number of Expected Participants: _____

Amount of Individual Contribution: _____ Proposed Budget for the Activity / Project: _____
(Please submit a separate detailed budget proposal & list of participants)

ALIGNMENT WITH INSTITUTIONAL VISION, MISSION AND FORMATION GOALS:

Check the mission statement(s) satisfied by the nature of your activity.

☐ The University shall provide a learning environment in order for its students to acquire the attributes that will make them globally competitive.

☐ The Institute shall engage in economically viable research, development, and innovation.

☐ The Institute shall provide state-of-the-art solutions to problems of industries and communities.

Enumerate and briefly explain the applicable Mapua Core Values honed or formed by reason of your activity:
(Discipline, Excellence, Commitment, Integrity and Relevance)

If and when applicable, enumerate the Program Educational Objectives (PEO) or Program Objectives (PO) Satisfied in this Activity

IN-CHARGE / ORGANIZERS OF ACTIVITY:

We, the undersigned students/faculty members/organizer/adviser of Mapua University, shall hold ourselves jointly and severally responsible for any injury to persons arising from the activity that we applied for, and we shall supervise the activity and comply with school policies e.g. no alcoholic beverages and other unlawful activities during the activity.

Class Officer / Organizer (Name and Signature)	Faculty Adviser/Organizer (Name and Signature)
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APPROVED BY:

Dean / Subject Chair (Name & Signature) <small>(for Co-Curricular Activities)</small>	Officer-in-Charge Facilities (Name & Signature) <small>(for activities inside the campus)</small>
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NOTATION / APPROVAL:	NOTED:
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Asst. Vice President, OSAAR	Head, Campus Development & Maintenance
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To be accomplished in three (3) copies and distributed as follows: 1. Security Office 2. Office of Studen Affairs 3. Applicant	
<p>COMPLETE THE REQUIRED ATTACHMENTS AND SUBMIT NOT LATER <u>7 DAYS</u> BEFORE THE ACTIVITY</p> <p>CHECKLIST:</p> <ul style="list-style-type: none">1. Activity Description/Project Proposal (detailed information about the activity including venue set up, equipment req'ts, etc)2. List of Participants (Including visitors/alumni/outsideers)3. Detailed Budget Proposal (Including source of fund/s , list of possible of sponsors/benefactors)<ul style="list-style-type: none">for meetings, include the Agenda of Meetingfor seminars, include<ul style="list-style-type: none">Brief Description of SeminarResume/Cur. Vitae of Speaker (approved by CCESC)For out of school and/or Sunday/Holiday activities, include Notarized Parent Consent Form (downloadable at Mapua Website)For fund raising activities, make a letter addressed to the University President thru OSA at least 14 days before the activity. Include the following:<ul style="list-style-type: none">Purpose of the fund raising (for what activity will it be used)Breakdown / Budget Proposal (for the fund raising)Budget Requirement for the Project / ActivityList of Possible Sponsors / Sample MOA/MOU/ Type of Sponsorship	<p><u>3DAYS AFTER EVERY ACTIVITY,</u> SUBMIT THE FOLLOWING:</p> <p>POST ACTIVITY EVALUATION FOR <u>MAJOR ACTIVITIES</u></p> <ul style="list-style-type: none">Copy of Approved PermitAttendance SheetEvaluation Forms (downloadable at Mapua website)MinutesAssessment (Include Problems Encountered and Solutions and Recommendations)Liquidated Financial Statement if ApplicablePictures/Video <p>*Place in long brown envelope</p> <p>POST ACTIVITY EVALUATION FOR <u>MINOR ACTIVITIES</u></p> <ul style="list-style-type: none">Attendance SheetMinutesAssessment (Include Problems Encountered and Solutions and Recommendations)