STUDENT ACTIVITY APPLICATION FORM

KINDLY READ CAREFULLY THE INSTRUCTIONS AT THE BACK

Name of Organization/Class/Department:				
[ ] Academic	[ ] Non-Academic	[ ] Co-curricular	[ ] Extra-Curricular	[ ] Volunteer
Title of Activity:				
Venue of Activity/Address:				
Inclusive Dates:				
Expected number of participants:		**Time Start:**	**Time End:**	
[ ] On-Campus [ ] Off-Campus		**[ ] Live-in [ ] Live-out**		
Applicant *Signature Over Printed Name*		**Moderator/Faculty In-Charge** *Signature Over Printed Name*		
Designation:	Date Filed:	Dept./ Unit:	Date Signed:	
Mobile No.:		Mobile No.:		
Ateneo Faculty/Staff Representative/s to Oversee the Activity				
Signature Over Printed Name	*Contact Number*	*Signature Over Printed Name*	*Contact Number*	
Note: Submit this Form with required attachments three (3) days before the activity implementation.				

---------- **PLEASE DO NOT WRITE BELOW** ----------

Received by:	**Date:**	**Approved:**	**Received:**	
Name of Organization/Department:			***Signature Over Printed Name***	
ASSESSMENT	[ ] Cover Letter	**Program Classification**	**TRACK NO.: ____-___-_____**	
[ ] Concept Paper/Program Flow	[ ] Facility Reservation	[ ] Spiritual Formation [ ] Operations Management [ ] Team-Building [ ] Social Involvement [ ] Education & Skills Development [ ] Programs & Projects	**Equivalent Points**	
[ ] House Rules	[ ] Requirements: _____		**Multiplier**	
[ ] 2 List of Participants/Guests	[ ] Promptness		**Points Deduction**	
[ ] Parent's Permit -	[ ] Completeness		**Total Points**	
REMARKS: If applicable, only those with Parents' Permits are allowed to join the activity. Kindly attach all supporting documents.				

---------- **APPROBATION** ----------

RODOLFO SB. VIRTUS JR. Director of Student Affairs	**JANET B. BADONG-BADILLA** Deputy AVP for Formation	**ALFREDO C. FABAY, Ph.D.** Academic Vice President	**FR. PRIMITIVO E. VIRAY, JR., S.J.** University President
[ ] Recommended [ ] Approved [ ] Disapproved	[ ] Recommended [ ] Approved [ ] Disapproved	[ ] Recommended [ ] Approved [ ] Disapproved	[ ] Approved [ ] Disapproved
Remarks:			

OSA-SF-01 Revised 2016

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TRACK NO.__-_____

OFFICE OF STUDENT AFFAIRS
ATENEO DE NAGA UNIVERSITY
City of Naga 4400

STUDENT ACTIVITY APPROVAL FORM

Copy For: [ ] Requestor [ ] Admin. Services [ ] Venue Custodian	
Organization/Class/Department:	
Title of Activity:	
Venue of Activity/Address:	
Inclusive Dates:	
Time Start:	**Time End:**
[ ] On-Campus [ ] Off-Campus	[ ] Live-in [ ] Live-out
Attending Faculty/Staff:	
Approved: **RODOLFO SB. VIRTUS JR.** *OSA Director*	
Remarks: *If applicable, only those with Parents' Permits are allowed to join the activity. Ensure the presence of moderator/faculty/staff. If necessary, kindly photocopy this form for more copies. Any changes to the information stated above should be approved by OSA*	

OSA-SF-02

TRACK NO.__-_____

OFFICE OF STUDENT AFFAIRS
ATENEO DE NAGA UNIVERSITY
City of Naga 4400

STUDENT ACTIVITY APPROVAL FORM

Copy For: [ ] Requestor [ ] Admin. Services [ ] Venue Custodian	
Organization/Class/Department:	
Title of Activity:	
Venue of Activity/Address:	
Inclusive Dates:	
Time Start:	**Time End:**
[ ] On-Campus [ ] Off-Campus	[ ] Live-in [ ] Live-out
Attending Faculty/Staff:	
Approved: **RODOLFO SB. VIRTUS JR.** *OSA Director*	
Remarks: *If applicable, only those with Parents' Permits are allowed to join the activity. Ensure the presence of moderator/faculty/staff. If necessary, kindly photocopy this form for more copies. Any changes to the information stated above should be approved by OSA*	

OSA-SF-02

GUIDELINES FOR STUDENT ACTIVITY APPLICATIONS

A. Instruction

1. Secure from OSA the Student Activity Application Form (OSA-SF-01) and Student Activity House Rules (OSA-SF-04A/OSA-SF-04B). Thoroughly accomplish the form and make sure that all required documents are attached. For other requirements, please refer to the checklist below.
2. If the activity is scheduled beyond 9:00 pm, overnight held on/off-campus, ask also for Parents' Permit Form (OSA-SF-01A) and photocopy the same for each of the participating students. Fill-out necessary information; make sure that the moderator and the overseeing faculty/staff affix their signatures on the permit. Upon collection of the permit, verify if parent/s checked the option *I am permitting my son/daughter to join…* If no option was checked, return the same permit to the participant. Only those permitted by their parents/ward/guardian shall be included in the Official List of participants and be allowed to join the activity.
3. Submit the accomplished OSA Student Activity Application Form (with parent's permits if necessary) together with other requirements to OSA at least ***(3) office days*** before the date of the activity (especially for Sunday/Holiday/Off-Campus activities.) Non-compliance or late submission of the requirements shall be a ground for disapproval of the activity. (Please take note of the Activity Ban period.)
4. For follow-up, be guided by the table below as to the duration of processing of the application by OSA. Once approved, secure the Student Activity Approval Form (OSA-SF-02) attached to the Student Activity Application Form, before the activity implementation. If more persons/offices must be furnished, fill-out an additional copy of the (OSA-SF-02) Student Activity Approval Form. This is needed for the final approval of your venue reservation (for On-Campus Activities.)
5. For student organizations, the evaluation of the activity must be submitted one week after its conduct and must be included in the Mid-year/Year-end Accomplishment Report.

B. Summary of Attachments required upon submission of application

SCHEDULE AND VENUE OF ACTIVITY	ATTACHMENT REQUIRED							APPROBATION	
	Concept Paper / Program Flow*	Parent's Permit	Two (2) Copies of List of Participants and Guests	One (1) copy House Rules (Signed by overseeing faculty or event head)	Cover Letter**	Tentative Facility Reservation	Other Requirements as needed	LEVEL OF APPROVAL	PROCESSING OF APPROVAL ***
On Campus Activities during School Days/Sundays between 7:30 am to 9:00 pm	✓ Sunday/Holiday Activities	✓ For Activities beyond 9PM	✓ For Sunday/Holiday Activities only	✓ House Rules OSA-SF-04B	X	✓		OSA	5 minutes to 1 hour
On Campus Activities during School Days but Beyond School Hours until 11:00 pm	✓	✓	✓	✓ House Rules OSA-SF-04A	X	✓		DAVP	½ - 1 office day
Academic/Non-Academic, Student Organization Off-Campus Activities not beyond 11pm	✓	✓	✓	✓ House Rules OSA-SF-04A	X	X		DAVP	2 office days
Academic-related Off-Campus Activities, Activities that Require Excusing Students from their Classes	✓	✓	✓	✓ House Rules OSA-SF-04A	Letter to the Academic Vice President	X		AVP	3 office days
For Overnight Activities	✓	✓	✓	✓ House Rules OSA-SF-04A	Letter to University President	✓ if on-campus	Copy of Vehicle's travel permit, Driver's license	President	3 office days
For Student Tours	✓	✓	✓	✓ House Rules OSA-SF-04A	Letter to University President	X	Copy of Vehicle's travel permit, Driver's license, Contract with tour/servicing company	President	3 office days

Notes:
** Concept paper should include details such as budget breakdown, source of budget, participants' counterpart and collection of fees as needed.*
***Letter should be endorsed by the Chairperson for departmental activities or of the Dean for college level activities or activities affecting/involving other colleges or departments other than the applying college. The Dean must endorse the Letter to President.*
**** Given, that requirements are complete*

C. Student Activity House Rules A or B (See separate sheet)