

			
Title:	APPLICATION FORM FOR RENTING UNIVERSITY FACILITY		
Application No.			
NAME OF RENTER:			
ADDRESS:			
CONTACT NUMBER:			
DATE OF EVENT:		TIME OF EVENT:	
EXPECTED NUMBER OF GUEST:		PURPOSE OF EVENT:	
I. FACILITY/IES TO BE RENTED: (Please check appropriate boxes :)			
FACILITIES		NO. OF HOURS (minimum of 4hrs)	AMOUNT
	Amphitheater		
	Multimedia Room		
	Classroom		
	Covered Court		
	Gymnasium with aircon		
	Gymnasium without aircon		
	Other facility/ies, please specify:		
II. MANPOWER REQUIREMENT:			
NO. OF MANPOWER NEEDED	NO. OF HOURS	PARTICULARS	MANPOWER RATE
			TOTAL MONPOWER RATE
		ELECTRICIAN	
		TECHNICIAN	
		JANITORS	
		SECURITY GUARD	
III. OTHER REQUIREMENTS:			
TOTAL AMOUNT:			
IV. SUMMARY OF APPLICATION:			
SIGNATURE OVER PRINTED NAME OF RENTER:			DATE:
For RGO Personnel Only: EVALUATION:			
Evaluated by:	Recommending Approval	Approved by:	
_____	_____	_____	
RGO Staff	Director for RGO	VP for Administration and Finance	
	Date: _____	Date: _____	