

UNIVERSITY OF SANTO TOMAS COLLEGE OF NURSING

España Boulevard, Sampaloc, Manila, Philippines 1015 Tel. No. 406-1611 loc.8241 | Telefax: 731-5738 | Website: www.ust.edu.ph

ROOM REQUEST FORM

€	Ordinary class				
€	Nursing Audit				
€	St. Elizabeth's	,	,		
€	2 nd Floor Fund	ction Hall	(Room	220-224)	
PU	RPOSE				
Act	tivity:				
	te:				
	g/ Dept/ Grou				
CI/	Faculty Advisor	er:			
If n	on-curricular, plea	se provide b	rief descr	iption of act	ivity:
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ROOM REQUEST FORM

€ Ordinary classroom:

€	Nursing Auditorium					
€	St. Elizabeth's Hall (Room 308)					
€	2 nd Floor Function Hall (Room 220-224)					
PU	RPOSE					
	tivity:					
	te:toAM/PM					
	g/ Dept/ Group/ RLE:					
CI	/ Faculty Adviser:					
If n	on-curricular, please provide brief description of activity:					
asia	DDITIONAL EQUIPMENT the from the built-in sound system and LCD be arranged separately with Equipment Room In-charge					
	ONFORME					
pre inc will pay and	accept full responsibility for the cleanliness and servation of the facilities. In the event of damage urred during use of the said premise, the undersigned is ling to undergo due process and if deemed necessary, for the corresponding repairs. I will ensure that lights a air-conditioning units are turned off, the room is left an and the doors locked.					
	lso certify that the room will not be used for any other pose than the one declared above.					
Na	me:					
De	signation:					
	ntact No.:					
Da	te Filed:					
AP	PROVAL					
	☐ Approved ☐ Disapproved					
	College Secretary					
	ROVING SECURITY VALIDATION					