EAD Control No:

1. **Basic Information:**

Program Title:

{programTitle}

Project Title:

{projectTitle}

Activity Title:

{activityTitle}

Date and Venue:

{dateAndVenue}

Clientele [Type & Number]:

{clienteleTypeAndNumber}

Estimated Cost:

{estimatedcost}

Fund Source:

{fundSource}

BSU-Funded Externally-Funded

Proponents/Implementors: {proponents}

Cooperating Agencies/Units:

{cooperatingAgency}

**II.\*Rationale:*(Please indicate the SDG, Extension agenda, GAD perspective, legal basis and for continuing projects on extension, kindly include situation analysis, baseline data)***

**III. Objectives:**

**IV. Participants:**

**V. Management:**

|  |  |
| --- | --- |
| **Names** | **Roles** |
|  |  |

**VI. Date and Venue:**

**VII. Activity Mechanics:**

**VIII. Expected Output:**

**IX. Budgetary Requirements**

Breakdown of Budgetary Requirements

|  |  |
| --- | --- |
| **Item Description** | **Estimated Cost [PhP]** |
| {#budgetaryRequirements} {item} | Php{estimatedCost} {/} |

Prepared by:

*Signature Over Printed Name*

[Proponent]

Recommending Approval: \*\*\* Funds Appropriated & Availability

*Signature Over Printed Name Signature Over Printed Name*

Director, Office of Extension Services Chief Administrative Officer, FSD

Approved:

*Signature Over Printed Name*

Vice President for Research and Extension

*\*\*Kindly fill-out N/A in the program/project title if the activity is not anchored to any program or project.*

*\*\*\*Kindly fill-out N/A in the fund appropriated and availability signatory if the fund is not accounted in BSU.*

***To be accomplished by OES Personnel***

Extension Activity Design Form received and Extension Accomplishment Report using QF-OES-07 Submission

Recorded by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DUE DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_