



**REQUEST FOR**

OVERNIGHT STAY

PERMISSION TO CONDUCT AN ACTIVITY

**Requesting Organization:** \_\_\_\_\_

**Name of Requesting Person:** \_\_\_\_\_

**Name of Adviser (if any):** \_\_\_\_\_

**Title/ Nature of Activity:** \_\_\_\_\_

**Date of stay/activity/period:** \_\_\_\_\_

**Venue:** \_\_\_\_\_

**PLEDGE**

We, the requested party/ies do hereby pledge to follow all the Rules and Regulation governing overnight stay/conduct activity within the University premises contained in the Student Handbook and other guidelines pertinent on the said approved request.

Furthermore, we also pledge the violation/s on our part of any provision/s in the guidelines will be our responsibility.

**Head of Organization**  
(Signature Over Printed Name)

**ACTION TAKEN**

**Recommending Approval:**

**Approved by:**

**CHERYL JOYCE D. JURADO, LPT, MEM**  
Head, Student Affairs and Services

**MARGARITA T. SEVILLA, PhD.**  
Campus Director