**REQUISITION FORM**

**USE OF FUNCTION ROOMS AND OTHER FACILITIES**

|  |  |  |
| --- | --- | --- |
| Functional Division/Office: | | |
| Activity: | | |
| Date/s: | Time: | Date and Time Requested: |
| Number of Participants: | |  |

**Instructions:** Please check all appropriate boxes of the requested facilities and indicate all relevant information.

Boardroom (Ground Floor, Main Building)

Audio-Visual Center (Third Floor, Main Building)

Conference Room 1 (Annex Building)

Conference Room 2 (Annex Building)

**Other Amenities Needed:**

|  |  |
| --- | --- |
| Sound System | SMART TV |
| Microphones | LED Wall |
| Portable Speaker | Air Conditioners |
| Overhead Projector and Projector Screen | Tables and Chairs |
| Others (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ LCD Projector and Screen | |

**Remarks**

|  |  |  |
| --- | --- | --- |
| Requested by: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Program Holder |  |
| Noted by: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chief |  |
| Coordinated with: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  General Services Section |  |
| Coordinated with: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ICT Unit |  |
| Approved by: | **DR. ARTURO B. BAYOCOT, CESO III**  Regional Director |  |

**Reminders:** 1. Coordinate with the personnel in charge

of the requested services and facilities.

2. Reproduce this form in five copies for the Office of the Regional Director

(ORD), General Services Section, Information and Communication

Technology Unit (ICTU), Requester, and FILE.

3. Observe CLAYGO.

4. Report any defective or damaged facilities before using them.

5. Leave the venue and return the facilities as they are.