*(The following is to be filled in by the Office of Gender and Development)*

**Application No.:**

**Date and Time of Received:**

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| --- |
| **APPLICATION FOR SEMINAR** |
| **Name of Activity** |  |
| **Department/Office/College:** |  |
| **Contact Number:** |  |
| **MS Teams Email:** |  |
| **Number of Participants:** |  |
| **Year Level of Participants:** |  |
| **Date and Time:** |  |
| **Venue:** |  |
|  |  |
| **REQUEST FOR BUDGET** |
|

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| --- | --- | --- | --- |
| **Particulars** | **Quantity** | **Cost** | **Total** |
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|  |  |  |  |
| **Total** |  |  |   |

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| **DESCRIPTION OF THE ACTIVITY** |
|  |
| **OBJECTIVES (State general and specific objectives, purpose of the study including problems intended to be solved, hypotheses to be tested, etc.)** |
|  |
| APPROVAL FOR SEMINAR:  Director, OGAD Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |