



Republic of the Philippines
GUIMARAS STATE UNIVERSITY
 Mc Lain, Buenavista, Guimaras



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FM-DPM-GSU-TDE-02		
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Series Number : _____

TRAINING REQUEST /ACTIVITY PROPOSAL FORM

Requesting Department/Proponent:	Date Prepared:
Training / Activity Title: _____	
Number of Participants: _____ Target Participants: _____	
Venue: _____	
Proposed Budget : _____ Budget Source: _____	
Training Date/Schedule _____ Included in the _____ Year _____ : Yes [] No []	
Background Information/Rationale: <i>(identify why training is needed)</i>	
Training Learning Objectives: <i>(identify the learning objectives to be achieved during the training)</i>	
Expected Output: <i>(desired output of the activity)</i>	



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Detailed Budgetary Requirements: *(details of the expenses to be incurred)*

Methodology and Requirements: *(methods to be used and list requirements prior to and during the training)*

Evaluation

Prepared by: Vice President Concerned (VPAA, VPAF, VPRETI)	Date:
Allotment Available: AO V (Budget Officer III)	Date:
Approved by: _____ SUC President III	Date: