

AVAILABILITY OF SCHEDULE FOR THE USE OF FACILITIES

Requesting Offic	:e/Organi	zation			
Address			Tel. No	./s	
Name of Contac	t Person/	'Authorize	d Representative		
Date		(8	1 a	
AVAILABILITY OF	FACILITI	ES			
Available	()	Not Available	()
Prepared by:			Noted by:		
RONNEL M. MIF Admin. Officer II			FELICIDAD B. ZU Director III	RBANO	

จากใจการของกลุ้วใจการ เพลเ**อส์** 25 (ปี 2012 2012



NATIONAL TVET TRAINERS ACADEMY Marikina City Tel. No. 655-7065/Telefax No. 655-6577



FACILITIES RESERVATION FORM

Address		ana		Tel. N	n./s
Name of Contact F	Person/Authorized Repres	sentative			
Purpose/Nature of	f Activity (Pls. tick):		-		
Meeting () Assembly ()	Team Buile	ding (
Training () Worship (j	Others (Pl		
RESERVATION DET	^Ails				
Room/Area	Capacity	Rate	per Hour	Date/Time of Event	Number of Expected Pax
	Capacity .	Day	Night		
Ylagan Hall	500 pax	Php300	Php400		
Session 1	40-50 pax	250	250		-
ession 2	25-35 pax	250	250		•
Conference Room	100-150 pax	400	400		
Chairs		7.50	7.50		
Note: All areas are	provided with chairs exc	ept Ylagan H	Iall and Main E	Building Lobby.	
			777 4		
		- AK	NOWLEDGEN	MENT	
I hereby a of facilities.	acknowledge and commit	to conform a	nd abide with t	the NTTA, TESDA Rules a	and Regulations regarding the use
				Approved by:	
Signature Over I	Printed Name				4
	36	Sk			FELICIDAD B. ZURBANO Director, NTTA
tevised as of 02 July 2012					

NTTA, TESDA Rules and Regulations on Use of Facilities

- 1. Reservation for use of NTTA facilities must be made five working days before the actual event;
- 2. Request Form (Please see Annex A) shall be submitted to the NTTA Administrative Officer;
- The Administrative Officer shall confirm in writing the availability of the facilities;
- All requests must be approved by the NTTA Director;
- The NTTA guard-on-duty shall check/inspect belongings of the participants for security reasons:
 - Drugs, deadly weapons, and other accident afflicting devices are prohibited; and
 - Registered firearms should be deposited to the guard-on-duty for safekeeping;
- 6. Bringing in and drinking alcoholic beverages are strictly prohibited. Smoking inside the NTTA premises is not allowed;
- 7. All equipment and furniture to be brought in during the event must be registered with the guard-on-duty for clearance and monitoring purposes;
- 8. All chairs, tables, and other fixtures must be properly arranged and accounted for after use;
- All the facilities and surroundings must be properly cleaned after use. Proper waste disposal should be observed at all times;
- 10. Paraphernalias should be removed and properly disposed. Use of staple wire, contact cement or glue for mounting are strictly prohibited;
- 11. All lights and other electrical facilities must be switched off after use; doors must be securely locked;
- 12. The requesting partylend user shall be held accountable for any damages of the facilities;
- 13. Wearing of IDs of all participants during weekdays is a must;
- 14. Proper dress code should be observed;
- 15. In the event that there is a TESDA Conference/Seminar which will be in conflict with the date of event reserved, the NTTA has the right to re-schedule the reservation upon proper notification; and
- 16. The NTTA reserves the right to decline request for use of facilities if the aforementioned terms and conditions were previously not followed or observed by the requesting party.

	A CONTRACTOR OF THE PROPERTY O
-	TECHNICAL FUCATION AND SKILLS DEVELOPMENT AUTI ITY
	No.: Dale:
	ORDER OF PAYMENT
	The COLLECTING OFFICER NITA
	Please issue Official Receipt in favor of
	(Henc)
-	(Auktora/Ollive)
	In the amount of (P)
	For the payment of
1	· 22 02 02 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	Per Bill Mo
	Please deposit the collections under Bank Account Flo Name of Bank Amount
	Account flo Name of Bank Amount P P P P P P P P P
	RONNEL M. MIRASOL Admin Officer III, NT FA

Tech [Education and St National TVET To Mayor Chanyungoo St., 5	die Development Admor, amers Academy la: Elena Malikina City
RESĒRVATIO	NFORM
Vlayan Hall Conference Room Name: Address: Purpose: BILLING STAT	Office Let. No. Date. Lime:
Charges P //hour x	hours = F
Charges P/plece x	pieces = P
	TOTAL = P
	Approved by:
	RONNEL M. MIRASOL Admin Officer III, NTA
COMMIT	MENT:
T promise to abide by the rules an regarding the use of facilities.	nd regulations set by HTTA TESDA
	Signalure over publied name
RECORDS	OF PAYMENT
Amount Paid: Official Receipt No. Date:	Posted by:
	LYN I DE GUZMAN Collecting Ufficer

TOTAL	DECEDIATION CODM
Duration: Activity: Contact Person: Contact Nos.: Office: Address: TESDA Non-TESDA Type of Room Rate/s per head/day Air-con Room Ordinary Room Number of Guests Male Female Total LYN I. DE GUZMAN Dormitory Manager	Duration: Activity: Contact Person: Contact Nos.: Office: Address: TESDA Non-TESDA Type of Room Air-con Room Ordinary Room Number of Guests Male Female Total LYN I. DE GUZMAN Dormitory Manager
Duration: Activity: Contact Person: Contact Nos.: Office: Address: TESDA Non-TESDA Type of Room Rate/s per head/day Air-con Room Ordinary Room Number of Guests Male Female Total PENO. 3 DF NO. 3 DF NO. 3 DF NO. 3 DF NO. 3 Type of Room Rate/s per head/day Confirmed	Duration: Activity: Contact Person: Contact Nos.: Office: Address: TESDA Non-TESDA Type of Room Rate/s per head/day Air-con Room Ordinary Room Number of Guests Type of Reservation Male Temporary Female Confirmed

Dormitory Manager

Dormitory Manager

Annex 13d

Technical Education and Skills Development Authority NATIONAL TVET TRAINERS ACADEMY

DF No. 1

DORMITORY REGISTRATION FORM

NAME:		De	esignation:		
School/Office:					
ddress:					
			 *		
raining/Activit					
ponsor:					
100		DURATIO			
Date	Time	Date	Time	Room	Rate
of Arrival	Check In	of Departure	Check Out	Number	per Day
		BEDDING	GS		
	ISSU			RETRI	EVAL
Blanket	Bed Sheet	Pillowcase	Pillow	All Complete:	
Diamot				Checked by:	
				13011.55	ALIENANI.
Transient's	Signature			LYN I. DE	
				Dormitory	Manager
OTE: Soiled	beddings should b	oe surrendered an l	hour before che	cking out.	
	Technical Ed NATI	lucation and Skill ONAL TVET TRAI	s Development NERS ACADE	t Authority MY	
	DORM	IITORY REGIS	TRATION FO	PRM .	
IAME:		D	esignation:		
chool/Office:					
ddress:					
raining/Activit					
	· <u>y · </u>				
ponsor:		DUDATI	04/		
	Time	DURATI-	Time	Room	Rate
Date		of Departure	Check Out	Number	per Day
of Arrival	Check In	or Departure	CHECK Out	Tambol	por Buy
	<u> </u>				
	1001	BEDDIN	GS	RETRI	EV/AL
		UED Pillowcase	Pillow	All Complete:	LVAL
Blanket	Bed Sheet	Fillowcase	THIOW	Checked by:	-
<u> </u>	<u> </u>	<u> </u>	l	Torrected by.	
Transient's	s Signature	-		LYN I. DE	GUZMAN
				Dormitory	Manager

NOTE:

Soiled beddings should be surrendered an hour before checking out.

THE MANAGEMENT IS NOT RESPONSIBLE FOR YOUR VALUABLES.

Annex 13e

Technical Education and Skills Development Authority NATIONAL TVET TRAINERS ACADEMY

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<u> </u>	
Office:	
Contact Number/s:	

Room	PRINTED NAME	Arr	ival	Depa	rture TIME	SIGNATURE	REMARKS
Number	PRINTED NAME	DATE	TIME	DATE	TIME	SIGNATURE	REWARKS
			**		30.50		
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				1000	10 Van Waren 11		
 							
	7 - 7						
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			32,31				
				.			
					3/20		

Certified Correct:

LYN I. DE GUZMAN

Dormitory Manager I

Technical Education and Skills Development Authority National TVET Trainers Academy DORMITORY BILLING STATEMENT

			100 mg/m				
Date	BILLING NO.	RM. NO.	RM. RATE	Ordinary Room	TWICHO	NOO!NT	Check Out
-ile		de de estados de todos de estados				da/s lodging	
Dormitory File				Air-con Room			Check In
	NAME	SCHOOL	ADDRESS	ACCOMMODATION Air-con Room	DURATION	REMARKS	TIME

Ronnel M. Mirasol

Admin, Officer III

Technical Education and Skills Development Authority
National TVET Trainers Academy
DORMITORY BILLING STATEMENT

		L	
	Cashier's Copy	Δ	Date
NAME		8	BILLING NO.
SCHOOL		R	RM. NO.
ADDRESS		<u> R</u>	RM. RATE
ACCOMMODATION Air-con Room	Air-con Room	0	Ordinary Room
DURATION		V	TIVITOMO
REMARKS	da/s lodging		
TIME	Check In	၁	Check Out

Ronnel M. Mirasol Admin, Officer III

Technical Education and Skills Development Authority National TVET Trainers Academy DORMITORY BILLING STATEMENT

	Dormitory File	Date	
NAME		BILLING NO.	
SCHOOL		RM. NO.	
ADDRESS		RM. RATE	
ACCOMMODATION	Air-con Room	Ordinary Room	
DURATION		TNIOMA	
REMARKS	da/s lodging		
TIME	Check In	Check Out	

Ronnel M. Mirasol Admin, Officer III

Technical Education and Skills Development Authority National TVET Trainers Academy DORMITORY BILLING STATEMENT

Date	BILLING NO.	RM. NO.	RM. RATE	Ordinary Room	TMICINA		Check Out
Cashier's Copy	2000 CONTROL CONTROL	30000000		Air-con Room		da/s lodging	Check In
	NAME	SCHOOL	ADDRESS	ACCOMMODATION Air-con Room	DURATION	REMARKS	TIME

Ronnel M. Mirasol Admin, Officer III