



## POLYTECHNIC COLLEGE OF THE CITY OF MEYCAUAYAN

Pag-asa Street, Malhacan, City of Meycauayan, Bulacan

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**OFFICE FOR STUDENT AFFAIRS**



### In-Campus Activity Permission (ICAP) Form

Requesting Program/Organization: \_\_\_\_\_

Title of the Activity: \_\_\_\_\_

Nature of the Activity:  Academic  Organization-related

Briefly state the General Purpose of the Activity: \_\_\_\_\_

Coverage of the Activity:  Organizational  Section  Program-wide  College-wide  Others (specify): \_\_\_\_\_

Specific Venue/Room: \_\_\_\_\_ Specific Facilities and Equipment to be Used: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ From: \_\_\_\_\_ to \_\_\_\_\_

Number of Participants: \_\_\_\_\_

	Participant 1	Participant 2	Participant 3	Participant 4	Participant 5
Name:					
Student #:					
Section:					

*\*For more than five (5) participants, attach additional sheet providing the needed data on the table above*

**Terms and Conditions: The undersigned acknowledge and agree to the following (Kindly tick the boxes with ✓):**

- All participants themselves have filled up this form, gave their consent and understand all the information provided, as well as adhere to all the terms and conditions stipulated herein.
- All participants will enforce safety protocol and will not cause injury or illness.
- Participant(s) will not join the activity if they have experienced symptoms of fever, fatigue, difficulty in breathing, dry cough or any other symptoms relating to COVID-19 within the last 7 days.
- All participants will maintain cleanliness of the venue all throughout the activity.
- Facilities, equipment, and articles within the venue will be used with due care.
- The activity will not disrupt concurrent activities and classes near the venue.
- All participants are expected to act in a responsible manner. Acts committed that are opposed to the rules and regulations of the PCCM are subject to disciplinary sanctions.
- All participants will come to PCCM/event place in proper school uniform/attire with ID and face mask and in prescribed haircut and hair color.

**Compliance to Pre-activity Requirements Checklist: Kindly tick the boxes with ✓, just leave blank if not applicable.**

- Duly Accomplished Parental Consent Form of student participants (from Office for Student Affairs)
- Approved Project Proposal, with duly attached program, participants, and guests

Permission and Approval from the:

- Property Custodian

\_\_\_\_\_/\_\_\_\_\_,  
Signature over printed name      Date

- Program Head

\_\_\_\_\_/\_\_\_\_\_,  
Signature over printed name      Date

Upon signing this form, you are giving your consent to PCCM to process your personal information in relation to the in-campus activity you are asking permission for.

The Polytechnic College of the City of Meycauayan (PCCM) and the City Government of Meycauayan will do its part to protect the interest and safety of its students. Furthermore, PCCM and the City Government of Meycauayan are not responsible for any unavoidable accidents and circumstances that the students may be involved in during the conduct of this activity.

**Submitted by:**

- CSG/ACSO President  PCCM Teaching/Non-teaching Personnel

\_\_\_\_\_/\_\_\_\_\_, Position/Designation: \_\_\_\_\_  
Signature over printed name      Date

**Conforme: (Leave blank if not applicable)**

CSG/ACSO Adviser

\_\_\_\_\_/\_\_\_\_\_  
Signature over printed name      Date

Recommending Approval:

**Dr. MA. PAZ G. CONTRERAS**

Director, Office for Student Affairs  
Academic Support and Student Services Division

**Mr. GERARD M. GAZA**

Physical Plant and Facilities Division Head  
Administrative Division

Approved:

**Dr. RENELIZA C. STA. ANA**

College Dean/Officer-in-Charge, PCCM