



## Permit for Tarpaulin Posting

Reference Number (For OVCCA Staff):

**OVCCA-TP-2023-**\_\_\_\_\_

**OFFICE OF THE VICE CHANCELLOR FOR  
COMMUNITY AFFAIRS**  
University of the Philippines Diliman  
Email: [ovcca.updiliman@up.edu.ph](mailto:ovcca.updiliman@up.edu.ph)  
Contact Number: 89818500  
(VOIP 8601 / 2591)

Details of Requesting Party				Date Received:	
				Requirements	
Name of Requesting Party (UP Unit / UP Accredited Organization)				<input type="checkbox"/> For UP Units: Endorsement from Dean / Director <input type="checkbox"/> For UP Accredited Organization: Endorsement from OVCSA, OSPAs, OAR, College, or Faculty Adviser (whichever is applicable)	
Classification of Requesting Party (Check one)	UP Unit / Office	<input type="checkbox"/>	UP Employee Organization		<input type="checkbox"/>
	UP Student Organization	<input type="checkbox"/>	UP Alumni Organization		<input type="checkbox"/>
Name of Representative				<input type="checkbox"/> Copy of the UP ID of the representative	
UP Mail / E-mail of Representative				<input type="checkbox"/> Duly Accomplished Form	
Contact Number of Representative				<input type="checkbox"/> Image of Tarpaulin	

Details of the Tarpaulin				Instruction to Requesting Party	
Objectives of the Tarpaulin (Announcement / Content)				1. Email requirements to the OVCCA thru <a href="mailto:ovcca.updiliman@up.edu.ph">ovcca.updiliman@up.edu.ph</a> at least 5 working days prior to preferred date of posting. (Subject: REQUEST FOR TARPAULIN POSTING)  2. Bring copy of the approved permit, tarpaulin (with 2 inches diameter eyelet on 4 corners), and galvanized iron wire to the Campus Maintenance Office.	
Desired Location	Academic Oval: Inner Lane Size: 1 x 1.5 m	<input type="checkbox"/>	Vinzon's Hall Tarp Stand Size: 1 x 3 m		<input type="checkbox"/>
	Academic Oval: Inner Lane Size: 1 x 1.5 m	<input type="checkbox"/>	Vinzon's Hall Tarp Stand Size: 1 x 3 m		<input type="checkbox"/>
	University Avenue Size: 1 x 3 m	<input type="checkbox"/>	Number of Tarpaulin:		
Endorsement from Head (For non-personal purpose)	Signature over printed name and designation			Date	

(Do not write anything beyond this part)

Action of the VCCA	Approved	<input type="checkbox"/>	Disapproved	<input type="checkbox"/>
Validity Period				
Remarks				
Signature	<b>ROEHL L. JAMON</b> Vice Chancellor for Community Affairs			

**Data Privacy Notice:** By accomplishing this form, you express your consent for the UPD OVCCA to collect, record, and retrieve your personal information. The same personal information shall be used for validation, coordination, and communication purposes in relation to your request for OVCCA services. It shall be retained in our records for one year or until it is deemed necessary and shall be treated in accordance with the Data Privacy Act of 2012 (Republic Act No. 10173) and the UP Diliman Privacy Policy. It may also be disclosed to authorities for any alleged violation of law or rules of the University.