FORM: C

UNIVERSITY OF KYRENIA OFFICE OF HEALTH, CULTURE AND SPORTS' SOCIAL AND CULTURAL CLUBS ACTIVITY APPLICATION FORM

To University of Kyrenia Office of Health, Culture and Sports,

Head of Office of Health, Culture and Sports

	Application Date:/
Name of the Club :	
Time of Activity :	
Date of Activity :	
Name of Activity :	
Location of Activity :	
Target Group of the Activity:	
Aim of the Activity :	
REQUES	TS FOR THE ACTIVITY
Activity Participation Certificate	(number)
Poster/Brochures	(number/number)
Hall	(number of people)
Bus Service	(number of people)
and Details (Date/Departure-Arrival/Route)	
Other Requests	
Name of Guests Attenting the Activity (Bio Statment of the Guest)	
Airplane Ticket	Number of Tickets :
	Arrival Date:
	Departure Date:
Note: This form must be filled in at least 1 (one Office of Health, Culture and Sports.	one) month in advance and submitted for approval and signiture APPROVAL
Office of Health, Culture and Sports	University of Kyrenia Rect

Vice Rector