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| **REPUBLIC OF TURKEY****GEBZE TECHNICAL UNIVERSITY****Directorate of Health, Culture and Sports****Event Form for Student Societies (internal use)** |
| APPLYING STUDENT SOCIETY: |  | DATE APPLIED: | ESTIMATED NUMBER OF ATTENDING STUDENTS : |
| EVENT TYPE | ( ) Conference | ( ) Panel | ( ) Talk | ( ) Concert |
| ( ) Trip/Visit | ( ) Sports Event | ( ) Cultural Event | ( ) Exhibition Booth |
| Description:……………………………………………………………………………………………………. |
| DETAILS OF THE INVITEES | FULL NAME: | TITLE: | POSITION: | INSTITUTION/ORGANIZATION: |
| EVENT DATE/TIME | Start: | End: | Total Number of Days: |
| EVENT VENUE |  |  EVENT VENUE/HALL SUPERVISOR’S APPROVALFull Name: Signature:  |
| SPECIAL REQUESTS FOR THE EVENT | ( ) Sound System ( ) Tables ( ) Chairs ( ) Stationary and Printing ServicesOther (please specify):…………………………………………………………………………………………………………………. |
| Student Society President Full Name: Signature: | Student Society Academic AdvisorFull Name:Signature: | Directorate of Health, Culture and Sports Student Societies Committee  Full Name: Signature: |
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| Directorate of Construction and Technical WorksBranch Office of Gardening, Landscaping and Transportation ServicesFull Name: Signature: | Office of Press and Public RelationsFull Name:Signature:  | Directorate of Administrative and Financial AffairsSecurity Services DivisionFull Name: Signature: |

PLEASE NOTE: Applications for any event to be carried out must be made 15 days prior to the event.

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**APPROVED/REJECTED**

**Director of Health, Culture and Sports**