

Open Art Theatre Reservation Application
Faculty of Management and Finance, University of Ruhuna

Name of the applicant	
Faculty/ Department/ Branch/Unit	
Description of the Event/Function	
Details of the participants	
Date and Time of the Event/Function	

I hereby request the permission to use the Open Art Theatre of the Faculty of Management and Finance, University of Ruhuna for the above-mentioned event/function on the date specified above and herewith submit the properly signed agreement.

Applicant Signature and Name :
 Contact Number :
 Date :

Recommendation of the Head/Branch/ Section:	Signature and Name Date:
Recommendation of the Dean of the Faculty/ If applicable only	Signature and Name Date:
Confirmation of the availability of the Open Art Theatre on the above specified date	Assistant Registrar Faculty of Management and Finance
Recommendation of the Open Art Theatre Reservation Committee of the Faculty of Management and Finance, University of Ruhuna	Signature and Name Date:
Recommendation of the Dean/ Faculty of Management and Finance, University of Ruhuna	Signature and Name Date:
Approval of the Deputy Vice Chancellor	Signature and Name Date: