

UNIVERSITY OF SANTO TOMAS-LEGAZPI Office of Media, Alumni, and Public Affairs	Reference No. MAPA Form B1e	Effectivity date: SY 2018-2020	Revision No.: 03
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REQUEST FOR PHOTO DOCUMENTATION

Please provide all the details being requested in this form and submit it two working days before the event. For inquiries or clarifications, contact MAPA at 276/+639759230746 or please refer to the MAPA Form B1e Procedure Manual.

Requesting College/Department	Medium of File Transfer <input type="radio"/> E-mail: _____ <input type="radio"/> Flash drive (reformatted)
Activity Details Name: Date: Time: Venue:	Requested by _____ Signature above printed name/position Noted by _____ Signature above printed name/Head of Office
Contact Information	

Please attach a copy of the programme.

For MAPA Personnel only

Control Number	Transaction Tracker	
Action	Date	Name/Signature
1. The MAPA Form B1e is received by the office.		
2. The form is verified by the media content development staff.		
3. The form is approved by MAPA Director.		
4. The form is endorsed to the media production staff.		
5. The post-processed photos are endorsed to the media content development staff.		
6. The post-processed photos are sent via the chosen medium of file transfer of the requesting department.		
7. The post-processed photos are uploaded in Facebook/website.		

Remarks:
