



ABUYOG COMMUNITY COLLEGE

Abuyog, Leyte

STUDENT AFFAIRS AND SERVICES

SAS-SO-FORM 7 OPERATIONAL PLAN

For School Year _____

Name of Student

Organization

College/Institute

Department

: _____

: _____

: _____

Project/Activity	Objective/s of the Activity	Date of Activity	Persons Involved	Budgetary Requirement	Source of Fund

Prepared by

Noted by

President

Adviser