


Central Philippine University

Jaro, Iloilo City, Philippines

HUMAN RESOURCE DEVELOPMENT OFFICE

Tel. No.: 63 33 3291971 loc 1035, 63 33 3296053

POST ACTIVITY REPORT
Sponsoring Institution/Unit:

| |
|----------------------------|
| 1. Nature of Activity: |
| 2. Date: |
| 3. Venue: |
| 4. Objectives: |
| 5. Participants: |
| 6. Resource Person/s: |
| 7. Source of Funds: |
| 8. Target Date of Re-Echo: |

Submitted by:
Noted by

 PRINTED NAME & SIGNATURE/ Date

 PRINTED NAME & SIGNATURE of UNIT HEAD/ Date

Verified by:
Noted by

 Training Assistant/ Date

 Director-HRDO/ Date

****Attachments: (Please check)**
As participant/ Resource Person
 Photocopy of Certificate of Attendance/Completion

 Training Handouts

As Sponsoring Unit

Folder containing

 Attendance

 Training Handouts

 3 Pictures of the Event

 Training Evaluation