

SOP-CO-001_Organizing University-Level Event Event Master List

活動資料 Event Information

活動名稱 Name of event		日期 Date / 時間 Time	
主辦單位 Organizer(s)		對象 Target audience	
地點 Venue		預計人數 Expected number of audience	

申請者聯絡資料 (如適用) Contact Information of Requester (If applicable)

姓名 Name		部門 Unit	
電話 Tel		申請日期 Request Date	
電郵 Email			

活動範圍 Activities Scope

- Ceremony 儀式
- Cocktail Reception 招待酒會
- Meeting 會議
- Conference 論壇
- Seminar / Lecture 研討會 / 講座
- Lunch / Dinner / Refreshment
午宴、晚宴 / 茶點招待
- UM Activity Day 澳大活動日
- Campus Visit 校園探訪

詳細資料 Details

傳訊部公共關係處專用 For CO-PRS Only

Remarks 備註：

Please fill in this Event Master List according to the below instructions (請以以下方式填寫此表格)

A tick to represent necessary / 劃勾代表需要

Empty box to represent not necessary or not applicable / 留空代表不需要或不適用

第一部分 Part I 邀請嘉賓 Guest Invitation & Reception	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		
Guest Invitation			
<input type="checkbox"/> Invitation Category	<input type="checkbox"/> 政府部門	<input type="checkbox"/> 外交公署	<input type="checkbox"/> 榮譽學位授予人士
	<input type="checkbox"/> 全部部門	<input type="checkbox"/> 特派專員 <input type="checkbox"/> 副特派專員	<input type="checkbox"/> 本地高等院校
	<input type="checkbox"/> 13個主要部門	<input type="checkbox"/> 澳門大學議庭成員	<input type="checkbox"/> 中學
	<input type="checkbox"/> 直屬行政長官管轄的部門	<input type="checkbox"/> 澳門大學校董會成員	<input type="checkbox"/> 澳大校友
	<input type="checkbox"/> 社會文化司轄下部門	<input type="checkbox"/> 駐本澳領事	<input type="checkbox"/> 非高等教育委員會
	<input type="checkbox"/> 司級 <input type="checkbox"/> 局級 <input type="checkbox"/> 副局級	<input type="checkbox"/> 澳大發展基金會捐款人	<input type="checkbox"/> 社團
	<input type="checkbox"/> 中聯辦	<input type="checkbox"/> 學術獎贊助機構	<input type="checkbox"/> 會長 <input type="checkbox"/> 理事長
	<input type="checkbox"/> 主任 <input type="checkbox"/> 副主任	<input type="checkbox"/> 澳門大學歷屆校長	<input type="checkbox"/> 顧問
	<input type="checkbox"/> 其他 _____	<input type="checkbox"/> 本地 <input type="checkbox"/> 海外	<input type="checkbox"/> 傳媒
	<input type="checkbox"/> 大學創始人		
<input type="checkbox"/> Invitation Format	<input type="checkbox"/> Invitation Card	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> Invitation Letter	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> Email	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> E-bulletin (Student / Staff)	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> E-Invitation (System)	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> Social Media (FB, WeChat)	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
	<input type="checkbox"/> Others _____	<input type="checkbox"/> Chi <input type="checkbox"/> Eng <input type="checkbox"/> Port	Target _____ Attachment _____
<input type="checkbox"/> Collection of RSVP	Responsible by:	Due Date:	
<input type="checkbox"/> Follow up with no-reply invitees	Responsible by:	Due Date:	
	<input type="checkbox"/> Fax <input type="checkbox"/> Calls <input type="checkbox"/> Email		
<input type="checkbox"/> Sending of other documents	Responsible by:	Due Date:	
	<input type="checkbox"/> Car Permit	<input type="checkbox"/> Uniform	
	<input type="checkbox"/> Information/Document	<input type="checkbox"/> Others	

Guest Reception			
<input type="checkbox"/> VIP Room	<input type="checkbox"/> Water / Glass & lid	<input type="checkbox"/> Refreshment	<input type="checkbox"/> Seat label / Name Tent
	<input type="checkbox"/> Souvenirs	<input type="checkbox"/> Stationery	<input type="checkbox"/> WC
<input type="checkbox"/> Reception Area	<input type="checkbox"/> Corsage / Table flower	<input type="checkbox"/> Name tent for name card	<input type="checkbox"/> Tray for name card
	<input type="checkbox"/> Brochure / Leaflet	<input type="checkbox"/> Souvenir	<input type="checkbox"/> SI machines
	<input type="checkbox"/> SI Notice	<input type="checkbox"/> Signing Book	<input type="checkbox"/> Signing Pen
	<input type="checkbox"/> Bowl with candy	<input type="checkbox"/> Reception Staff	<input type="checkbox"/> Others _____
<input type="checkbox"/> Seating Area	<input type="checkbox"/> Seat Label	<input type="checkbox"/> Seat Category Label	<input type="checkbox"/> SI Machines
	<input type="checkbox"/> Brochure / Leaflet	<input type="checkbox"/> Souvenirs	<input type="checkbox"/> Others _____
CE Invitation			
<input type="checkbox"/> Invitation of CE	<input type="checkbox"/> Invitation Letter	<input type="checkbox"/> Others _____	
<input type="checkbox"/> Confirmation of CE	<input type="checkbox"/> Reply Letter	<input type="checkbox"/> Other Channels _____	
CE Reception			
<input type="checkbox"/> Site Check	<input type="checkbox"/> Site Check with CE office/Police	<input type="checkbox"/> Seat Plan	<input type="checkbox"/> Standing Plan
	<input type="checkbox"/> Route Map	<input type="checkbox"/> Inform CMDO	
<input type="checkbox"/> On Site Reception	<input type="checkbox"/> Assign staff to receive CE	<input type="checkbox"/> VIP Room	<input type="checkbox"/> Refreshment
	<input type="checkbox"/> Cushion	<input type="checkbox"/> Others _____	
第二部分 Part II 綜合統籌 General Logistics	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		Remarks
Event preparation	Responsible by:	Due Date:	
<input type="checkbox"/> Budget & Proposal			
<input type="checkbox"/> Confirm programme rundown			
<input type="checkbox"/> Task Allocation			
Recruit of Manpower	Responsible by:	Due Date:	
<input type="checkbox"/> SI Interpreter			
<input type="checkbox"/> Recruit student helpers			
<input type="checkbox"/> Recruit simultaneous interpreter(s)			
<input type="checkbox"/> Recruit outsource mover / cleaner			
<input type="checkbox"/> Helper from other units			
Working Personnel	Responsible by:	Due Date:	
<input type="checkbox"/> Prepare uniform			
<input type="checkbox"/> Prepare working badge			
<input type="checkbox"/> Briefing with all working personnel			
<input type="checkbox"/> Walkie-talkies			
Before event date	Responsible by:	Due Date:	
<input type="checkbox"/> OC Briefing (Date: _____ / Time: _____)			
<input type="checkbox"/> Rehearsal (Date: _____ / Time: _____)			
<input type="checkbox"/> Send out arrangement to UM heads			
<input type="checkbox"/> Task allocation on site			

第三部分 Part III 餐飲 Catering	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		Remarks
<input type="checkbox"/> Budget & Proposal			
<input type="checkbox"/> Programme rundown			
<input type="checkbox"/> Photo taking & Video Shooting	<input type="checkbox"/> In-house (Pax:_____)	<input type="checkbox"/> Outsource (Pax:_____)	
<input type="checkbox"/> Simultaneous Translation	<input type="checkbox"/> Mobile SI	<input type="checkbox"/> Reserve Translator	
Confirm restaurant/ supplier			
<input type="checkbox"/> Gather 3 quotations	(1) _____ (2) _____ (3) _____		
<input type="checkbox"/> Number of table/participants	<input type="checkbox"/> Head Table (_____ pax)	<input type="checkbox"/> Round Table (__tables@ __pax)	
<input type="checkbox"/> Serving time and duration (Start Time: _____ / Duration: _____ / End Time: _____)			
<input type="checkbox"/> Table type	<input type="checkbox"/> Round <input type="checkbox"/> Long <input type="checkbox"/> L shape <input type="checkbox"/> U shape <input type="checkbox"/> Others _____		
<input type="checkbox"/> Menu style	<input type="checkbox"/> Western	<input type="checkbox"/> Separate Dish	
	<input type="checkbox"/> Chinese	<input type="checkbox"/> Vegetarian Menu	
	<input type="checkbox"/> Buffet	<input type="checkbox"/> Others	
<input type="checkbox"/> Beverages (UM Wine)	<input type="checkbox"/> Corkage Fee (_____)	<input type="checkbox"/> Free ____ Bottles	
<input type="checkbox"/> Cocktail Reception			
<input type="checkbox"/> Coffee Break			
<input type="checkbox"/> Payment Method	<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> On Credit		
<input type="checkbox"/> Additional Charge			
<input type="checkbox"/> Cancellation Policy	<input type="checkbox"/> Confirmation due date		
Site-check			
<input type="checkbox"/> WC Location			
<input type="checkbox"/> Lift Location			
<input type="checkbox"/> Car Park	<input type="checkbox"/> Free Parking (_____ Hours)	<input type="checkbox"/> Specific area	
Venue Set up			
<input type="checkbox"/> Table set up style	<input type="checkbox"/> Golden <input type="checkbox"/> Red <input type="checkbox"/> Others _____		
<input type="checkbox"/> Signage	<input type="checkbox"/> By vendor <input type="checkbox"/> By UM		
<input type="checkbox"/> Seat plan			
<input type="checkbox"/> VIP Room arrangement	<input type="checkbox"/> Sofa area	<input type="checkbox"/> Beverages & Refreshment	
	<input type="checkbox"/> Seat plan (<input type="checkbox"/> By vendor / <input type="checkbox"/> UM)	<input type="checkbox"/> Name tent	
<input type="checkbox"/> Reception Arrangement	<input type="checkbox"/> Stationery & signing book	<input type="checkbox"/> Tray for name card	
<input type="checkbox"/> Floral Arrangement	<input type="checkbox"/> Head table	<input type="checkbox"/> Corsage	
	<input type="checkbox"/> Bouquet		
<input type="checkbox"/> Souvenir Arrangement	<input type="checkbox"/> UM Wine	<input type="checkbox"/> Info Kit	
	<input type="checkbox"/> Silver plate	<input type="checkbox"/> Others	
Stage Arrangement			
<input type="checkbox"/> MC (Name:_____)	<input type="checkbox"/> Language:_____		
<input type="checkbox"/> Equipment	<input type="checkbox"/> Mic (stand mic / podium mic / wireless mic)		
	<input type="checkbox"/> Podium (<input type="checkbox"/> UM Logo)	<input type="checkbox"/> Projector / screen	
	<input type="checkbox"/> PA system & Speaker	<input type="checkbox"/> Backdrop (Install date _____)	
	<input type="checkbox"/> Stairs for photo taking	<input type="checkbox"/> Banner (Install date _____)	
	<input type="checkbox"/> Projection source (DVD / Notebook / live-feed)	<input type="checkbox"/> Background Music	
<input type="checkbox"/> Toasting	<input type="checkbox"/> Tray & Wine	<input type="checkbox"/> Happy Lady	
<input type="checkbox"/> Performance			

第四部分 Part IV Media, Promotion, Publicity Service 媒體接待，活動宣傳及推廣	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:	
Item	Details		Remarks	
Promotion & Publicity				
<input type="checkbox"/> Promotion & Publicity Plan				
<input type="checkbox"/> Budget				
<input type="checkbox"/> Promotion & Publicity Schedule				
<input type="checkbox"/> Promotion & Publicity Items	<input type="checkbox"/> Pre-press release	Schedule:		
	<input type="checkbox"/> Post-press release	Schedule:		
	<input type="checkbox"/> UM Website	<input type="checkbox"/> Independent website		
		<input type="checkbox"/> UM Event Calendar		
	<input type="checkbox"/> Video Making	<input type="checkbox"/> Youtube (Schedule:)		
		<input type="checkbox"/> Facebook (Schedule:)		
		<input type="checkbox"/> UM Website (Schedule:)		
		<input type="checkbox"/> Wechat (Schedule:)		
	<input type="checkbox"/> E-bulletin	<input type="checkbox"/> Staff <input type="checkbox"/> Student		
		Schedule:		
	<input type="checkbox"/> Email	<input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Alumni		
		Schedule:		
	<input type="checkbox"/> SMS	<input type="checkbox"/> Staff <input type="checkbox"/> Student		
		Schedule:		
	<input type="checkbox"/> Newspaper Ad	Schedule:		
	<input type="checkbox"/> TV ad	Schedule:		
	<input type="checkbox"/> Radio Ad	Schedule:		
	<input type="checkbox"/> Facebook	Schedule:		
<input type="checkbox"/> Wechat	Schedule:			
<input type="checkbox"/> Weibo	Schedule:			
<input type="checkbox"/> Youtube	Schedule:			
<input type="checkbox"/> Other distribution	Schedule:			
Media Service				
<input type="checkbox"/> Press Conference	<input type="checkbox"/> Confirm date/ time/ venue	<input type="checkbox"/> Spokeperson(s)		
	<input type="checkbox"/> Media interview	<input type="checkbox"/> Information kit		
<input type="checkbox"/> Media reception	<input type="checkbox"/> Media Invitation for event	<input type="checkbox"/> Seat Plan (Area)		
	<input type="checkbox"/> Media name badge	<input type="checkbox"/> Attendance log sheet		
	<input type="checkbox"/> Media interview	<input type="checkbox"/> Information kit		
	<input type="checkbox"/> Voice Record	<input type="checkbox"/> Tray for Name Card		
<input type="checkbox"/> Material distribution internal units	<input type="checkbox"/> E-bulletin <input type="checkbox"/> Email <input type="checkbox"/> Other channels			
<input type="checkbox"/> Info to CO-PRS	<input type="checkbox"/> Email <input type="checkbox"/> Hard Copy <input type="checkbox"/> Other channels			
Record Service				
<input type="checkbox"/> Photo taking	<input type="checkbox"/> Budget	<input type="checkbox"/> No of photographer _____		
	<input type="checkbox"/> In house	<input type="checkbox"/> Outsource		
	<input type="checkbox"/> Working badge	<input type="checkbox"/> Service Briefing		
	<input type="checkbox"/> Duration	<input type="checkbox"/> Post-edit		
<input type="checkbox"/> Video recording	<input type="checkbox"/> Budget	<input type="checkbox"/> No of camera men _____		
	<input type="checkbox"/> In house	<input type="checkbox"/> Outsource		
	<input type="checkbox"/> Working badge	<input type="checkbox"/> Service Briefing		
	<input type="checkbox"/> Livefeed	<input type="checkbox"/> Duration		
	<input type="checkbox"/> Post-edit			
Evaluation				
<input type="checkbox"/> Media coverage:				
<input type="checkbox"/> Social media reach/view:				

第五部分 Part V Production & Souvenir 設計及紀念品製作	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		Remarks
Production			
<input type="checkbox"/> Budget Planning (\$_____)			
<input type="checkbox"/> Confirm Production Items	<input type="checkbox"/> Poster	<input type="checkbox"/> Ticket	
	<input type="checkbox"/> Huge Signage	<input type="checkbox"/> Easy up	
	<input type="checkbox"/> Backdrop	<input type="checkbox"/> Stage	
	<input type="checkbox"/> Banner	<input type="checkbox"/> Directional Signage	
	<input type="checkbox"/> Sticker	<input type="checkbox"/> Leaflet / flyer	
	<input type="checkbox"/> Brochure	<input type="checkbox"/> Tailor-made production	
	<input type="checkbox"/> Others		
<input type="checkbox"/> Raise PR			
<input type="checkbox"/> Obtain Quotation			
<input type="checkbox"/> Confirm Vendor			
<input type="checkbox"/> Site Check with Vendors	<input type="checkbox"/> Signage Plan	<input type="checkbox"/> Floor plan	
	<input type="checkbox"/> Loading Deck	<input type="checkbox"/> Lorry parking arrangement	
	<input type="checkbox"/> Installation notice to SFS	<input type="checkbox"/> Production spot	
<input type="checkbox"/> Confirm Design			
<input type="checkbox"/> Meeting with Designer	<input type="checkbox"/> In house designer	<input type="checkbox"/> Out-source designer	
<input type="checkbox"/> Design Element	<input type="checkbox"/> Design Template / main visual	<input type="checkbox"/> Wordings & Contents	
<input type="checkbox"/> Confirm layout timeline	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	
<input type="checkbox"/> Confirm Delivery & installation			
<input type="checkbox"/> Monitor Samples	<input type="checkbox"/> Colour tone	<input type="checkbox"/> Material	
<input type="checkbox"/> Monitor Installation			
<input type="checkbox"/> Confirm Dismantle			
Souvenir			
<input type="checkbox"/> Budget Planning			
<input type="checkbox"/> Raise PR			
<input type="checkbox"/> Obtain Quotation			
<input type="checkbox"/> Confirm Vendor			
<input type="checkbox"/> Confirm Souvenir/ Gift Items	<input type="checkbox"/> From Souvenir System	<input type="checkbox"/> Tailor-made souvenir	
	Item _____ To: _____	Item _____ To: _____	
	Item _____ To: _____	Item _____ To: _____	
	Item _____ To: _____	Item _____ To: _____	
	Item _____ To: _____	Item _____ To: _____	
<input type="checkbox"/> Confirm Design			
<input type="checkbox"/> Meeting with Designer	<input type="checkbox"/> In house designer	<input type="checkbox"/> Out-source designer	
<input type="checkbox"/> Confirm layout timeline	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	
	Item _____ DL: _____	Item _____ DL: _____	

第六部分 Part VI Entertainment & Accommodation 娛樂及住宿安排	完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		Remarks
Entertainment			
In Charged by:			
<input type="checkbox"/> City tour	Day & Time: _____	No. Pax: _____	
	Duration : _____	Spots: _____	
	<input type="checkbox"/> Transportation	<input type="checkbox"/> Tour guide	
	<input type="checkbox"/> Itinerary	<input type="checkbox"/> Contact Person	
<input type="checkbox"/> UM campus tour	Day & Time : _____	No. Pax : _____	
	Duration : _____	Visit Buildings: _____	
	<input type="checkbox"/> Transportation	PRSA (_____)	
	<input type="checkbox"/> Itinerary	<input type="checkbox"/> Management invitation	
<input type="checkbox"/> Show Ticket	Day & Time : _____	No. Pax : _____	
	Duration : _____	Ticket Level : _____	
	Ticket Price : _____	<input type="checkbox"/> Transportation	
	<input type="checkbox"/> Tour guide	<input type="checkbox"/> Sponsorship	
Accommodation			
<input type="checkbox"/> Budget & Proposal			
<input type="checkbox"/> UM Guest House / <input type="checkbox"/> Hotels			
<input type="checkbox"/> Confirm Accomodation	Contact Person: _____	Mobile & email: _____	
<input type="checkbox"/> Gather 3 quotations	Include: _____		
<input type="checkbox"/> Guests Depart country			
<input type="checkbox"/> Expected Arrival Time to Hotel			
<input type="checkbox"/> Number of Guests			
<input type="checkbox"/> Number of Rooms			
<input type="checkbox"/> Place UM information kit in the room			
<input type="checkbox"/> Check in / out Dates	Check-in ____ Check-out ____	_____ Days _____ Nights	
<input type="checkbox"/> Room Type	<input type="checkbox"/> Single	<input type="checkbox"/> King	
	<input type="checkbox"/> Double	<input type="checkbox"/> Queen	
	<input type="checkbox"/> Interconnecting Room	<input type="checkbox"/> Twin	
	<input type="checkbox"/> Suite	<input type="checkbox"/> Double Double Room	
<input type="checkbox"/> Room specials	<input type="checkbox"/> Delux	<input type="checkbox"/> Garden View	
	<input type="checkbox"/> Duplex (2 floors)	<input type="checkbox"/> Sea view	
	<input type="checkbox"/> With inhouse pool	<input type="checkbox"/> with balcony	
	<input type="checkbox"/> Other _____		
<input type="checkbox"/> Breakfast	<input type="checkbox"/> Fee / inclusive	<input type="checkbox"/> Self-paid	
<input type="checkbox"/> Additional Free Service			
<input type="checkbox"/> Payment Method	<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> On Credit		
<input type="checkbox"/> Cancelation Policy	<input type="checkbox"/> Confirmation due date		
<input type="checkbox"/> Currency exchange service	_____ currency	Converting Rate _____ Converting Date _____	
<input type="checkbox"/> Send Rooming list to hotel			

第七部分 Part VII Transportation & Security 交通及保安		完成日期： Due date:	經辦人： Handled by:	部門主管確認： Verified by: 日期 / Date:
Item	Details		Remarks	
Vehicle Arrangement				
<input type="checkbox"/> No. of passengers				
<input type="checkbox"/> Date & Time				
<input type="checkbox"/> Itinerary				
<input type="checkbox"/> Transportation Range	<input type="checkbox"/> UM Campus	<input type="checkbox"/> Taipa		
	<input type="checkbox"/> Macau	<input type="checkbox"/> Coloane		
	<input type="checkbox"/> Mainland Area	<input type="checkbox"/> Others		
<input type="checkbox"/> Transportation Location	<input type="checkbox"/> Campus Building (_____)	<input type="checkbox"/> Terminals (_____)		
	<input type="checkbox"/> Hotels (_____)	<input type="checkbox"/> Dinner/Lunch Venue		
	<input type="checkbox"/> Event Venue	<input type="checkbox"/> Others (_____)		
<input type="checkbox"/> Transportation Purpose				
<input type="checkbox"/> Campus Tour				
<input type="checkbox"/> Event invitation	<input type="checkbox"/> Ceremony <input type="checkbox"/> Dinner <input type="checkbox"/> Lunch <input type="checkbox"/> Seminar <input type="checkbox"/> Meeting			
<input type="checkbox"/> Loop Bus	<input type="checkbox"/> Campus <-> Macau <input type="checkbox"/> In Campus <input type="checkbox"/> Campus <-> Taipa			
<input type="checkbox"/> Stop locations				
<input type="checkbox"/> Stop Signage				
<input type="checkbox"/> Pick-up / Drop-off service	<input type="checkbox"/> Arrival schedule	<input type="checkbox"/> Assigning pick-up staff		
	<input type="checkbox"/> Prepare pick-up signage			
<input type="checkbox"/> Transportation Source	<input type="checkbox"/> SFS (UM service)	<input type="checkbox"/> Outsource (_____)		
<input type="checkbox"/> Transportation Type	<input type="checkbox"/> 4-seat (<input type="checkbox"/> UM Bus <input type="checkbox"/> Outsource)	Details:		
	<input type="checkbox"/> 7-seat (<input type="checkbox"/> UM Bus <input type="checkbox"/> Outsource)	Details:		
	<input type="checkbox"/> 16-seat (<input type="checkbox"/> UM Bus <input type="checkbox"/> Outsource)	Details:		
	<input type="checkbox"/> 21-seat (<input type="checkbox"/> UM Bus <input type="checkbox"/> Outsource)	Details:		
	<input type="checkbox"/> 37-seat	Details:		
	<input type="checkbox"/> 42-seat	Details:		
<input type="checkbox"/> Confirm passenger list for each vehicle				
<input type="checkbox"/> Bus signs	<input type="checkbox"/> In front <input type="checkbox"/> Side <input type="checkbox"/> Back	<input type="checkbox"/> Chi <input type="checkbox"/> Eng		
<input type="checkbox"/> Inform participants availability of bus / car	Contact Person: _____	Mobile/email: _____		
Self-driving Arrangement				
<input type="checkbox"/> No. of passengers				
<input type="checkbox"/> Date & Time			Duration: _____	
<input type="checkbox"/> No of cars				
<input type="checkbox"/> Car Types	<input type="checkbox"/> 4-Seater	<input type="checkbox"/> 7-seater		
	<input type="checkbox"/> Lorry (Height:_____)			
<input type="checkbox"/> Confirm Car-plates	<input type="checkbox"/> Send to SFS			
<input type="checkbox"/> Car Permit				
Car Park Arrangement				
<input type="checkbox"/> Car Park Location	<input type="checkbox"/> P1 _____ Lots	<input type="checkbox"/> P4 _____ Lots		
	<input type="checkbox"/> P2 _____ Lots	<input type="checkbox"/> P5 _____ Lots		
	<input type="checkbox"/> P3 _____ Lots	<input type="checkbox"/> P6 _____ Lots		
<input type="checkbox"/> Advance Reservation for VIP	<input type="checkbox"/> P1 _____ Lots	<input type="checkbox"/> P4 _____ Lots		
	<input type="checkbox"/> P2 _____ Lots	<input type="checkbox"/> P5 _____ Lots		
	<input type="checkbox"/> P3 _____ Lots	<input type="checkbox"/> P6 _____ Lots		
<input type="checkbox"/> Car Park Signage				
<input type="checkbox"/> Direction Guiding	<input type="checkbox"/> Security (SFS) _____ pax	<input type="checkbox"/> Student Helpers _____ pax		
	<input type="checkbox"/> PRSA _____ pax	<input type="checkbox"/> CO staff _____ pax		
Security Arrangement				
<input type="checkbox"/> Request Location	<input type="checkbox"/> Venue (_____)	<input type="checkbox"/> Carpark (_____)		
<input type="checkbox"/> No of Security each Location				
<input type="checkbox"/> Additional Job Task	<input type="checkbox"/> Check Car Permit			
<input type="checkbox"/> Information to send to SFS				

