

This form SHALL be filled and submitted to the Provost Office

Dear Provost,				
am working as at the Department of				
I need to reserve				
for				
Note: Room reservation is subject to availability. A maximum total of five (05) occupants can be accommodated in a single room. The room reservation non-transferable. Violation will lead to cancelation of reservation and future facilitation				
Please specify the number of extra mattresses required (Rs. 100/= per night will be charged)				
Following is the list of guests:				
S.No.	Name		Relation	
_				
Date of arrival:		Date of departure:		
I undertake that I will abide by all the rules and regulations of the University and will pay any				
amount / charge that occurs during my stay. At least a 24 hours prior notice for cancelation is required for refund.				
Name: Ph		Phone No:		Emergency Phone No.
Signature:				
FOR PROVOST OFFICE USE ONLY				
Available Rooms 1234567 Not Available		Room(s) No	0:	Reserved
Amount deposited:		Signature of the Deputy Provost		
Receipt No		Date:		
Nooorpe No		Dute.		