

GUEST HOUSE



Requisition Slip for Booking of Accommodation

Indenter's Name _____ Mobile No _____

Indenter's Designation: _____ Dept. _____

Name of the Guest: _____

Designation/ Relation to the Guest: _____

Address & contact details of the Guest: _____

(Provide separate endorsed list of guests with their designation and contact details if number of guest are more than one)

Expected arrival time: _____ Date: _____

Expected departure time: _____ Date: _____

No of rooms required (double bed) _____

Purpose of visit: _____

Any other information: (personal/official) _____

Charges will be paid by: Guest / indenter

(if the charges are not paid by the guest then the undersigned (indenter) agrees to settle the bills. Also the undersigned assure that the stay of the guest's shall not exceed the sanctioned period)

Date:

Signature of the indenter

Signature of hostel Manager/Warden/Dean-Stud counselling/HOD/FA
(If indenter is a student)

For office use only

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Officer in- Charge (Guest house)