RE UN	EVISED APPLICATION FORM FOR BOOKING OF ACCOMMODATION IN PANJAI IVERSITY GUEST HOUSE, FACULTY HOUSE AND GOLDEN JUBILEE GUEST HOUSE
1.	N. C. A.
	Name of actual Visitors 1
	3
2.	Phone No. & Address of the Visitor
3.	Relationship with applicant
4.	Place where accommodation is required
5.	Number of room/s required
6.	Exact purpose of visit (Give detail)
7.	Date/s for which room/s is/are required FromTo
8.	Day/days for which room/s is/are required
9.	Advance rent paid amount of RsReceipt Nodtdt
	(Original Receipt attached)
10.	Name of the applicant and phone No(in block letters)
11.	Designation of the applicant
12.	Name of the Department/College/ Institution in which employed
	 (ii) I shall clear all the dues before handing over the charge of room/s to the University/clear all the dues in case of my guest do not clear it. (iii) I further certify that I would use the room myself or for my personal guest but not for a guest of any marriage party or attendant of any patient of any hospital. (iv) That the Guest who intends to stay is free from any COVID related symptoms.
	Signature of the and
	Signature of the applicant Address:
	Address
Recor Head	mmended by the Principal/ l of the Department/Branch/College/Fellow
	ORTANT NOTE:
(a) (b)	restained in the state of the s
FOR	OFFICE USE)
	Room/s Nois/are lying vacant in thewhich be allotted to the above applicant for the period to
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ubm	nitted for orders, please
ubm	nitted for orders, please Dealing Official