

Requisition Slip for Auditorium

1. Name of the Department/ Institute/ Society/ Club organizing the event: _____

2. Date of Requisition Submission: _____
3. Title/ Purpose of the event: _____

3. Date of Requisition From _____ To _____
Timing of Requisition From _____ To _____
4. Faculty/ officer (Focal Person) responsible for maintaining cleanliness, safety of auditorium items/ IT appliances and discipline during the event:
Name _____ Signature _____ Cell # _____
5. Students responsible for maintaining cleanliness, safety of auditorium items/ IT appliances and discipline during the event (To be nominated by the officer at Sr. # 4)
Name _____ Signature _____ Cell # _____
Name _____ Signature _____ Cell # _____
6. Incharge Reservation Auditorium: _____
7. Recommended By:
Director/ Chairman/ Senior Tutor (Signature & Stamp): _____
Dean: _____
8. Incharge Auditorium: _____

Note: The user department will be himself responsible to contact the Director (IT) and PD (B&W) for the functioning of IT appliances and AC services