



ICSSR NORTH-WESTERN REGIONAL CENTRE
SEMINAR-CUM-GUEST HOUSE COMPLEX
PANJAB UNIVERSITY, CHANDIGARH
APPLICATION FOR RESERVATION OF GUEST-HOUSE ROOMS

Phone : 0172-2541157
Intercom : 4040/4039

1. Name of the applicant : _____
2. Designation: _____
3. Official Address : _____
4. Phone No. : (M) _____ (o) _____ (R) _____
5. Name of the visitor(s): _____
6. Complete address of the Visitor (s): _____
7. State clearly the purpose for which guest-room(s): _____
is / are to be booked (Academic / Private)
8. Whether invited by the Panjab University /
Official Work YES NO
9. Nature of work : Academic / any other
10. Whether invited by the Central / State Govt. : _____
11. No. of rooms required (2 persons allowed in one room) : _____
12. No. of persons expected to stay : _____
13. Date & No. of days for which rooms(s) is/are required : From _____ To _____ = _____ day(s)
14. State whether payment will be made by the: _____
Applicant / Department / Occupant

Declaration by the Applicant

- i) I have read the instructions/ conditions mentioned on the reverse, regarding booking of the Guest-House Complex carefully and shall abide by these.
- ii) I hereby undertake that rooms shall be vacated as mentioned above.
- iii) I (the applicant) shall clear all the dues in case of my guest do not clear it.
- iv) I certify that the rooms have not been booked for any marriage function.

Recommendation of the Chairman,
P.U. Teaching Department/ Head of the Institution/ Principal of College
(With Seal)

Signature of the applicant
Date :

FOR OFFICE USE ONLY

Guest House Room(s) is/are available from _____ to _____
Rental charges will be Rs. _____ per room, per day.

May be allowed to reserve. Submitted for orders, please.

DIRECTOR

(OFFICIAL CONCERNED)

P.T.O.