NIT GUEST HOUSE NATIONAL INSTITUTE OF TECHNOLOGY, KURUKSHETRA- 136 119

REQUEST FOR ACCOMODATION

(Form should reach Guest House two working days in advance)

1.	Name of the Guest
2.	Full Address
	Number of family members (if any)
4.	Number of rooms required
5.	Purpose of visit
6.	Expected arrival timeam/pm Date
7.	Expected departure timeam/pm Date
8.	Room rent to be charged at the rate: Normal/Concessional
9.	Payment to be made by the Guest/Employee
10	. Remarks
Th	e guest is known to me and I will pay the charges of the guest if not paid by him.
	Signature
	Gignatur e
De	esignationDepttDeptt
((TO BE FILLED IN ROOM RENT TO BE CHARGED IS REQUESTED AT CONCESSIONAL RATE)
Ku	Certified that the guest is my personal friend/relative or is coming to NIT irukshetra for official purpose.
	Signature
	Name
	For Official Use Only
1.	Room No. Allotted
2.	Period for Allotmentto
3.	Room Charges Rs
4.	Guest House Register Entry NoDate
5.	Room Rent Charges deposited vide receipt NoDate