

CENTRAL UNIVERSITY OF JAMMU

Rahya-Suchani (Bagla), District Samba, Jammu, J&K Website: www.cujammu.ac.in, Ph.01923-249634

Booking Form (Brig. Rajinder Singh Auditorium)

Part:A

1	Name of the Department/Centre			
2	Name of the Indenter			
3	Designation			
4	Name of coordinator, if any			
5	Mobile Number(s)	1. 2.		
6	Email			
7	Auditorium Required	Date From:	То:	٠.
		Time From:	То:	
8	Details of Event/Seminar/ Conference /Workshop, etc.			
9	No. of participants to attend (Projected)	-		

Part:	<u>B</u>	
(Plea	se 'tick' mark whichever is required)	
А	i) List of items required at the venue: i) Projector ii) PA System iii) Mics iv) Laser Pointer	
-		Signature of the Indenter
		Date:
		Name:
		Designation:
	Verified By:	g-
	Signature of Head/Director	
	Date:	
	Name:	
Note	:	
1. 2.	Please submit the Form 15 working-days ahead Cancellation or change in booking date shou before the programme.	

For Office Use Only			
Permission ma	y be accorded in favou	for the above said purpose	
from	<u></u>	vide No	dated

Recommended by:

PS to Hon'ble Vice Chancellor

Approving authority:

Registrar