

NIT GUEST HOUSE
NATIONAL INSTITUTE OF TECHNOLOGY KURUKSHETRA-136119

REQUEST FOR RESERVATION OF ROOM IN THE GUEST HOUSE
(Booking form should reach Guest House two working days in advance)

1. Name of the Guest.....
 2. Full Address.....
 3. Number of family members (if any).....
 4. Numbers of rooms required.....
 5. Purpose of visit.....
 6. Expected arrival time..... a.m./p.m. Date.....
 7. Expected departure time..... a.m./p.m. Date.....
 8. Room rent to be charged at the rate: Normal/Concessional
 9. Payment to be made by the: Guest/Employee
 10. Remarks.....
- The guest is known to me and I will pay the charges of the guest house if not paid by the guest.

Signature.....

Designation..... Name..... Deptt.....

(TO BE FILLED IF ROOM RENT TO BE CHARGED IS REQUESTED AT CONCESSIONAL RATE)

Certified that the guest is my personal friend/relative or is coming to NIT, Kurukshetra on official duty of the NIT, Kurukshetra.

Signature.....

Name.....

For Office use only

1. Room No. Alloted.....
2. Period for allotment..... to
3. Room Rent Rs.

May be allowed as above, please.

Officer-in-charge

Assistant

Guest House Clerk

Room Rent Deposit

Guest House Register Entry No. Dt

Total Amount Rs. (No. of days x Rate of Room Rent @ Rs.....)

From to

Room Rent charges Deposited vide receipt No. dt

Officer-in-charge
Prof-in-charge

Assistant

Guest House Clerk