SAHA INSTITUTE OF NUCLEAR PHYSICS

1/AF Bidhan Nagar, Kolkata-700064

REQUISITION FOR GUEST HOUSE ACCOMODATION

1.	Name of the Guest :	
2.	Designation :	
3.	Address (Office) :	
4.	Purpose : Official/ Other :	
5.	For Foreigner's passport details :	
6.	Duration of stay :	
7.	Date and Time of arrival :	
8.	Date and Time of departure :	
9. Food (Vegetarian / Non-Vegetarian):		
10. Mode of payment :		
11. Recommended by :		
12. Remarks, if any (SINP/Others) :		
Da	te	Signature
For Director/Registrar's Office		
Local hospitality/ Only accommodation approved/ Not approved		
Dir	rector	Registrar
FOR SINP GUEST HOUSE OFFICE USE		
Alle	otted Room No. Receipt No	Amount
		SINP Guest House Official

Copy to:

- 1. Director/Registrar
- 2. Office concerned SINP division/others
- 3. Security Officer