

Indian Institute of Technology Guwahati Guwahati – 781039, Assam, INDIA

Auditorium/Mini Audi/Conference Hall Booking Form

| Additorially with Addit Conference than booking Form | | | | | |
|--|--------|--|----------------|-------------------------|--|
| Hall Required | Dr. E | Dr. Bhupen Hazarika Auditorium | | | |
| | Mini | Mini Auditorium | | | |
| | Conf | Conference Hall No. of Conference Hall required (Out of 4): | | | |
| Name of the Indentor | Prof | Prof./Dr./Mrs.: | | | |
| Department/Section/Cent | re | | | | |
| Designation | | | | | |
| | | From | | То | |
| Date & Time | Dat | е | | | |
| | Tim | е | | | |
| Purpose of Booking | | | | | |
| | | | | | |
| | | | | | |
| Facilities Required | 1 | LCD Projector/PC/OHP | Projector | | |
| Please Tick (√) | | | | | |
| | | 2 Tie Pin/*Cordless microphone/microphone with stand/extra microphone without stand. | | | |
| | " | innout Stanu. | | | |
| | * | * The indentor is requested to contact EE/AEE/AE/JE (Electrical) well in | | | |
| | | advance for finalizing the requirement related to PA System which | | | |
| | ir | ncludes * procurement li | kes dry cell (| 9 volts) | |
| | | | | | |
| | | | | | |
| Counter Signature of De | an/HOD | OD/HOS/HOC Signature of the Indentor with date Email: | | | |
| | | Phone: | | | |
| | | | • | mone. | |
| For Office Use | | | | | |
| Hall Allotted Dr. B Hazarika Auditorium | | From | | То | |
| Mini Auditorium | Date | | | | |
| (Conf. Hall No) | Time | | | | |
| Office Note: | 1 | 1 | | | |
| | | | | | |
| | /n | | | | |
| Approval of the Director/Dy. Director/ Registrar | | | | Signature of AR (Estb.) | |
| Date: | | | | | |

CC: a. EE (Electrical) : Requesting for necessary logistic arrangements b. In- Charge, Maintenance Section : Requesting for necessary logistic arrangement