

भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

North Guwahati, Guwahati-781039

REQUEST FOR SENATE HALL BOOKING

Name of the Indentor	Prof./D	Prof./Dr./Mr./Ms:			
Department/Section/Centre	;				
Designation					
Date & Time of Booking	From:			То	
	Date				
	Time				
Purpose of Booking					
Facilities required (Please ✓ mark)	2				
Counter signature of the Dean/HOD/HOS/HOC			Signature of the Indentor with date Name of the Indentor: Deptt/Section/Centre. Contact address with telephone No. / E-mail Id (if any):		
For office use					
Senate Hall allotted	From	om		То	
	Date				
	Time				
Approval of the Director / Dy	Director / F		Signature of AR (Estb.)		
Communication A. F	-i (E1	4t. 1N 3	D C	Date:	

Copy to: A. Executive Engineer (Electrical): Requesting for necessary logistic arrangements.

B. In-charge. Computer Centre: Requesting for necessary logistic arrangements.