



INFORMATION AND LIBRARY NETWORK CENTRE

(An Inter University Centre of University Grants Commission)

Infocity, Gandhinagar - 382007

Email: adminofficer@inflibnet.ac.in, Phone & Tele-fax: 079-23268121&23268200

AUDITORIUM / TRAINING HALL REQUEST FORM

Date: _____

1. Organization Name : _____
2. Organization Address : _____
3. Organization GSTN : _____
4. Name of Applicant : _____
5. Designation : _____ Mobile No: _____ Email: _____
6. Purpose : _____
7. Organization Type : Government Non-Government
8. Please Mention the facility needed: Auditorium Training Lab
9. Date of Requirement: Auditorium: From _____ To _____ (Date)
Training Lab: From _____ To _____ (Date)
10. Time of Requirement: Auditorium: From _____ To _____ (hrs)
Training Lab: From _____ To _____ (Hrs)
11. Number of Guests (approx.): _____
12. Project Name (In case of Internal booking): _____

Name:

Designation:

Signature:

For Office Use

Facility Name: _____ booked for _____ From _____ To _____

Time Slot: _____

Booking Amount: ₹ _____

Cheque No/ Transaction details with date: _____

Date: _____

Administrative Officer (PA&F)

1. All the details are mandatory. Incomplete requests will not be entertained.

Copy to: 1) Security Gate 2) Booking file