



# INFORMATION AND LIBRARY NETWORK CENTRE

(An Inter University Centre of University Grants Commission)

Infocity, Gandhinagar - 382007

Email : adminofficer@inflibnet.ac.in, Phone: 079-23268121&23268000

## GUEST HOUSE ACCOMMODATION REQUEST FORM

Date: .....

Name of Applicant : .....

Designation : ..... Email: .....

Address : .....

.....

Purpose of visit Please Tick

Official

Personal

Sl. No	Name/s of the person/s who require GH Accommodation	Designation & Organization	Relationship	Age	Gender
1					
2					
3					
4					
5					

Address of Guest:			
Contact No.:	Fax No.:	E-mail.:	
Arrival Date & Time:		Departure Date & Time:	
Foreigners need to provide	Country:	Contact No:	Passport No:

Payment: **By Guest** / **By INFLIBNET Centre** / **INF Project** (The Guests are requested to follow the guidelines for Guests.)

Signature: ..... Name: .....

### **Recommendation of the concerned official of the INFLIBNET Centre**

The guest is personally known to me and I am responsible for his/her conduct. If he/she fails to make payment of lodging/boarding charges, the same may be made by me.

Signature: ..... Name & Designation: .....

### For Office Use

Room No: ..... booked for: ..... From ..... To .....

Category of Guest: VIP / Semi VIP / Double / Single

Date:

**Administrative Officer(PA&F)**

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

2. Guests are requested to produce ID cards.

Copy to: 1) Caretaker, Guest House, INFLIBNET 2) Security, INFLIBNET 3) Admin GH Booking File