



**DIBRUGARH UNIVERISTY**  
(REQUISTION FORM FOR ACCOMODATION IN THE GUEST HOUSE)

1. Name of the Guest :
2. Full Address of the Guest :  
with Telephone/Fax No/Email ID
3. The Guest is : Officially invited Guest/Parent of Student/DU Employee/Close relative of DU employee/Service Providers/ Faculty Members or Officials from Colleges Affiliated to DU/Others.
4. Purpose of Visit : Unofficial  
: Official (Please specify):
5. Accommodation is required: From.....to.....
6. Occupancy requested : Single/Double
7. Charge : Accommodation Food  
 a) To be paid by the applicant as per rate a) To be paid by the applicant as per rate  
 b) To be paid by the guests as per rate b) To be paid by the guests as per rate  
 c) To be paid by the University c) To be paid by the University  
 (Enclose a copy of approval of the Vice-Chancellor) (Enclose a copy of approval of the Vice-Chancellor)
8. Referred By :
- Signature of the applicant:  
Name

**RECOMMENDATION**

Certified that the visit of the guest is official and recommended for his/her/their accommodation in Dibrugarh University Guest House.

**Signature of the Head of the  
Department/Centre/Section:  
Date:**

**ORDER OF THE COMPETANT AUTHORITY : Approved/ Not Approved**

Signed by: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR ACCOUNTS DEPARTMENT**

1. Type of room allotted and rate per day:

2. Total Bill Amount :