



**NATIONAL SANSKRIT UNIVERSITY  
TIRUPATI – 517 507**

**REQUEST FOR ACCOMMODATION AT GUEST HOUSE FOR THE STAFF**

Date .....20....

NAME OF THE VISITOR - CAPITAL LETTERS + No of Accompanying members					
Address of the Visitor(s)					
Purpose of Visit (Details to be indicated)					
Period of Visit & Duration	Expected date and time of arrival .....	Expected date and time of departure .....	Number of Days.....		
Type of Accommodation (Tick as Appropriate) (Rooms will be allotted subject to availability)	<input type="checkbox"/> Double Bed Room A/C	<input type="checkbox"/> Triple Bed Room A/C	Total No. of Rooms Required.....		
PAYMENT to be made by (Tick as Appropriate)	<input type="checkbox"/> By Guest	<input type="checkbox"/> By Organizer of the programme	<input type="checkbox"/> By Official of the University(In the personal capacity)		
Name & ID No., designation, mobile No. and mail id. of the staff member of the University who seeks accommodation.	Name & ID No.....	Designation .....	Mobile No .....	Mail ID .....	Signature .....

**Note:**

1. Application (hard copy) should be sent to Guest House at least 3 days in advance, of the arrival. Rooms will be allotted based on the availability.
2. One day prior notice shall be given if the guest needs Breakfast, Lunch or Dinner.

**REGISTRAR**