

RAIGANJ UNIVERSITY

(Application form for Guest House)



To
The Registrar
Raiganj University

Date:

1. Name of the Applicant:
2. Purpose of visit:
3. Date and time of check in:
4. Date and time of check out:
5. Number of person(s):
6. Contact no and e-mail ID and address:

Signature of the applicant

Forwarded By:

1. Name:
2. Designation:
3. Department:
4. Signature:

Registrar
Raiganj University

Office Use Only

Sl. No:

Date:

Amount Paid	Challan No	Date

Signature of Dealing Assistant

Note-Tariff is to be paid on or before check-in/check-out as per Rule and Regulation of Raiganj University Guest House.