



University Centre for Outreach Programs & Extension

CHAUDHARY DEVI LAL UNIVERSITY SIRSA

(Established by the State Legislature Act 9 of 2003)

**REQUISITION FORM FOR TAGORE LECTURE THEATER, TAGORE BHAWAN,
EXTENSION**

- 1. Name of the applicant : _____
- 2. Designation : _____
- 3. Department : _____
- 4. Date & Duration : _____
- 5. Purpose(Conference/Workshop/Event/other) : _____
: _____
- 6. Whether Broucher/notice attached: Yes/No
- 7. Tentative Number of audience : _____

Signature of the applicant

- 8. Recommendations of Dean/Director/ Chairperson/Branch Head

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Signature of Dean/Director/ Chairperson/Branch Head

- 9. Undertaking: : I undertake that all the equipments are working properly when handed over to me

Signature of the applicant

Sanctioned/ Not Sanctioned (subject to availability)

Signature: _____

Note: - kindly arrange batteries at your on level for smooth and uninterrupted use of collar Mike. Further contact IT cell for technical support ,if required during the event.

