

# University of Kashmir, Srinagar

Hospitality & Protocol Office  
Phone No's 0192272215 (Office)

No:  
Dated :

**The Assistant Registrar**  
**(Officer In charge)**  
Hospitality & Protocol  
University of Kashmir  
Srinagar

Sir,

Please reserve accommodation for \_\_\_\_\_ Guest/s (Official / unofficial) with the particulars given hereunder:

| S. NO | Name / Designation / Address of the guests | Gender | Arrival Date/ Time | Departure / Date /Time | Period of stay | Purpose of visit ( in detail ) if official copy of the university assignment of the guests/s to be enclosed | No of room required |  | Rent / Food to be paid by Guest / Deptt |
|-------|--|--------|--------------------|------------------------|----------------|---|---------------------|--|---|
|       |  |        |                    |                        |                |   |                     |  |   |
|       |  |        |                    |                        |                |   |                     |  |   |

Email ID of HOD /Tel No .....

Email ID of Guest/Tel No .....

Relation with the guest .....

I know the guest personally, hence recommended for accommodation (in case of unofficial visit)

Signature of HOD/ Officer  
With Official Seal

**Important Instructions**

1. The requisition forms should be submitted at the H&P office ( Zabarwan Guest House)
2. The Requisition for booking be necessarily made on this format only
3. The Requisition should be made at least one week prior to date of arrival of the guests
4. In case the Guest is accompanying with another person his/her address and relation with the Guest be intimated against each name

**For office use only**

- |  |                                  |
|--|----------------------------------|
| 1. Accommodation: - Available / Not Available        | 2. Room No. Allotted _____       |
| 3. Zabarwan/ Sheikh Hamza Makhdoom (RA) Guest Houses | 4. Category _____                |
| 5. From _____ To _____                               | 6. Rent Charges ( Per day) _____ |
| 1. Total rent charges _____                          |                                  |

Signature of Dealing Assistant

Senior Assistant

Accommodation Authorized / Not Authorized

**Liaison Officer**  
**(Hospitality & Protocol)**

**Manager**  
**(Hospitality & Protocol)**

**Assistant Registrar**  
**(Hospitality & Protocol)**