

हरियाणा केंद्रीय विश्वविद्यालय / CENTRAL UNIVERSITY OF HARYANA

(संसद के अधिनियम के तहत स्थापित / Established under the Act of Parliament) जांट-पाली, महेन्द्रगढ़ (हरियाणा) / Jant-Pali, Mahendergarh (Haryana)

Requisition Form for Virtual Classroom

| 1. | Name: |
|-----------|--|
| 2. | Department/Office: |
| 3. | Designation: |
| 4. | Event Name: |
| | |
| 5. | Date of Program: |
| 6. | Organized By |
| 7. | Virtual Classroom Open Time: |
| 8. | Close Time: |
| 9. | Contact No.: |
| 10 | e-mail ID: |
| | |
| wi. wi | understand that the auditorium facility is to be used for academic/official work only. I undertake that I ll use this facility only for academic/official work and that I will not allow any outsider to the auditorium thout prior permission from the Competent Authority. I will also take responsibility of the audio/video vices available in the Auditorium. |
| Da | ste Signature of the Applicant |
| | |
| | |
| | |
| Da | signature of the Head with Official Seal |
| | or Office Use Only aditorium Facilities of Dr./Mr./Ms may be opened. |
| | |
| | System Analyst |
| Da | te: |
| Tin | ne: |
| | |