



ABV-Indian Institute of Information Technology & Management, Gwalior

MDP Centre Booking Format

Name of Institute faculty/Staff Requisitioning.....

Name of the Guest/Visiting faculty.....

Complete address of the Guest:-

1. Designation.....
2. Address.....
3. Email id.....Mobile No.....

No. of Persons.....

Purpose of Visit.....

Date of Arrival..... Date of Departure.....

Duration of stay.....

FOR OFFICIAL GUESTS ONLY

Type of Room

1. AC

2. Non-AC

Payment to be made
By Institute

Date.....

Name & Signature of Requisitioner

FOR PAYMENT BASIS

Type of Room

1. AC

2. Non-AC

Payment to be made by

1. Guest Himself

I hereby undertake the responsibility to settle the bill 7 days of the departure of the guest. In case the bill is not settled, I authorize the Institute to deduct the same from my salary.

Date.....

Name & Signature of the Institute faculty/Staff

Approved by

Registrar/Director



ABV-Indian Institute of Information Technology & Management, Gwalior

International Visitor Hostel Booking format

Name of Institute faculty/Staff Requisitioning.....

Name of the Guest/Visiting faculty.....

Complete address of the Guest:-

4. Designation.....

5. Address.....

6. Email id.....Mobile No.....

No. of Persons.....

Purpose of Visit.....

Date of Arrival..... Date of Departure.....

Duration of stay.....

FOR OFFICIAL GUESTS ONLY

Type of Room

3. AC

4. Non-AC

Payment to be made
By Institute

Date.....

Name & Signature of Requisitioner

FOR PAYMENT BASIS

Type of Room

3. AC

4. Non-AC

Payment to be made by

2. Guest Himself

I hereby undertake the responsibility to settle the bill 7 days of the departure of the guest. In case the bill is not settled, I authorize the Institute to deduct the same from my salary.

Date.....

Name & Signature of the Institute faculty/Staff

Approved by