

**International Guest House
Reservation Requisition Form**

1. **Name of the Applicant** :
Designation :
Full Address with contact No. :
2. **Name of the occupants** :
with Nationality :
No. of occupants :
3. **Purpose of visit**
 - a. CIIL Workshop/Seminar/Conference
 - b. CIIL staff / RLCs staff on official duty
 - c. CIIL staff / RLCs staff and family members
on personal visit
 - d. All other occupants official/personal visit
4. **Accommodation required for** _____ **days from** _____ **to** _____
5. **Type of accommodation required** : **VIP Suit/ Sharing Room**
6. **Payments to be received from the party/indenter/others specify.**
7. **If the accommodation is to be provided free of cost, please give details justification**
(Prior approval of the Director to be obtained)

Signature of Recommending Officer with name

Signature of Applicant/Date

For Estate Section

Type of room allotted :
Total No. of persons :
Category and Rent chargeable :
Estate Officer :

Manager

Estate Officer

ASST. DIRECTOR (ADMN)

Director
(In case of rent free accommodation)