

Name of the Dept./Centre.....

No.

Date:

Sub: Request for Accommodation in Hoysala House

Name	
Designation	
Address of the University/Institution/ Office	
Period of Stay	From To No. of days :
No. of Rooms required	
Purpose of visit (In case of Invitees to the Institute, approval letter number and date)	
Room Rent	For College/Institution/University Teachers : Rs.1000/- per day per person For Industry Participants : Rs.1500/- per day per person
Mode of Payment (Tick on the appropriate Visitor/Debit Head)	By the Visitor: (Please provide alternate debit head also) Debit Head:
Name of the Faculty Member Department	
Signature of the Faculty member	

Chairman
Of the Sponsoring faculty member's
Dept./Centre

To
The Chairman
Centre for Continuing Education, IISc.