



UNIVERSITY OF DELHI

Delhi - 110007

Application for booking of Open Space at Faculty of Arts

1. Name of the applicant :
2. Department/Organization :
3. Type of Organization : Department Centre College
 Hostel
 Other (Must be Specified)
4. Address :
5. Telephone/Email : Office
Extension, if any
EPABX
Fax
Resi.
Mobile
Email
6. Space Requirement (Exact location) :
7. Date(s) : On/from.....to.....
Total number of Days.....
Timings From.....to.....
8. Nature of Activity : Academic Social Awareness Cultural
 Charitable Activity Any other.....
.....(Please Specify)
9. Expected no. of participants :
10. Chief guest/celebraty if any :
11. Nature of programme :
- (Please enclose a copy of itinerary) :
12. Name of Sponsor(s), if N.A. :
- Source of funds for program (Give details) :

Recommended by :

[Signature of the Applicant]

[Rubber Stamp]

Dean of the Faculty/Head of the Department/
Principal of College/Director/Provost/O.S.D./
Staff Advisor DUSU/Deputy Registrar, D.U.

P.T.O.