**अखिल भारतीय आयुर्विज्ञान संस्थान राजकोट, गुजरात**

**All India Institute of Medical Sciences, Rajkot, Gujarat**

A Central Autonomous Body under PMSSY, MoH & FW

Government of India [www.aiimsrajkot.edu.in](http://www.aiimsrajkot.edu.in)

Department of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Lecture Hall / Conference Room booking form**

Kindly permit us to use Lecture Hall / Conference Room as per the following details.

|  |  |  |
| --- | --- | --- |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Lecture Hall No./ Conference Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please tick as appropriate)

Approximate Number of Audience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Date:\_\_\_\_\_\_\_\_ | Name, Sign. & Stamp of Requisitioner: | Sign. & Stamp of HoD/In-charge: |

**For Office Use**

Availability of time slot: Yes ▢ No ▢

Allotted **Lecture Hall / Conference Room**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verified By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_