

QUAID-I-AZAM UNIVERSITY
(DEPARTMENT OF EARTH SCIENCES)

No.QAU(_____) /20

Dated:- _____

Requisition Form
For Earth Sciences Auditorium

Name of the Department: -

Nature of Event: Academic OR Non-Academic (Please Tick Encircle)

For Academic Purposes

1. Name of Teacher (As Coordinator): _____
2. Date (s) _____
3. Timings: _____

Requirements(s) for the Event

1. Permission from HOD/OISA/Registrar/Vice-Chancellor
2. Surety from University Resident Officer (For Security Purpose)
3. Supporting Staff from Concerned Department/Section (Holding Event)
4. For Outside University Organizer (Fee Booking) Rs. _____

Signature of Coordinator _____

Signature of HOD _____

Signature of OISA _____

Resident Officer (For Ensuring Security Purpose) _____

Chairperson
Department of Earth Sciences

Available OR Not-Available

Registrar/Vice-Chancellor