UGC-Human Resource Development Centre





(Re-accredited by NAAC with A+ Grade)

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Faculty Guest House - Registration Form

(Please read the norms and regulations carefully.)

		(Please read the norm	is and regulations carefully.)
Name			
Sex		: Male / Female	
Designati	on	• •	
Institutional Address		:	
DI (0)			
Phone (Office)		•	
Mobile Number		•	
WhatsApp Number		•	
E-mail ID :		:	
Purpose of Stay : Participation in the		•	
		Participation in the RC	in
			C in
Duration		: From	a.m./p.m on
		To	a.m./p.m on
Residential Addres			
. 100.00.1110	,		
0	:	•	
Contacts,	in case of eme	rgency:	
Name(s) : (1)			Mobile:
(2)			Mobile:
	(2)		iviobile.
Physical D	isabilities/Hea	Ith Problems, if any:	
		UNDER	TAKING
l uı	ndertake to abid		ations of the UGC-HRDC Guest House of Bharathidasan
University	during my stay	and cooperate with the au	uthorities for the safe and peaceful stay of all the inmates.
D.			
Place:			
Date: Signature of the Participant			
For Office Use only			
<u> </u>	No.	:	Date :
Į.	Room Allotted:		Room Rent :
П	Receipt No.	:	Remarks, if any :

Staff in-charge of Guest House Staff in-charge of Cash Collection