



Event Requisition Form

Date: __ / __ / __

Name of the Event	:				
Type of the Event	:	FDP / Seminar / Workshop / Guest Lecture / _____			
Professional Society Involved	:	IEEE / IETE / ISTE / WiCYS / IGEN / _____			
Whether the event belongs to IIC	:	Yes / No			
Event Date(s)	:	From	:	__ / __ / __	
	:	To	:	__ / __ / __	
	:	Number of Days	:		
Event Time	:	From	:	__ / __ AM / PM*	
	:	To	:	__ / __ AM / PM*	
Event Organizer Details	:	Name	:		
	:	Department	:		
	:	Mobile Number	:		
No. of Participants	:	Internal	:		External :
Guest Details	:	No. of Guests	:		
	:	Name of the Guest(s)	:		
	:	Designation	:		
	:	Name of the Organization / Industry	:		

Event Requirements		
Venue Required*	:	Yes / No, if yes, provide in Annexure – I
Audio Required*	:	Yes / No, if yes, provide in Annexure – II
ICTS Required*	:	Yes / No, if yes, provide in Annexure – III
Transport Required*	:	Yes / No, if yes, provide in Annexure – IV (a) & IV (b)
Accommodation / Dining Required*	:	Yes / No, if yes, provide in Annexure – V
Media Required*	:	Yes / No, if yes, provide in Annexure – VI
	:	Yes / No, if yes, provide in Annexure – VII
Financial Required*	:	Yes / No
Other Requirements, if any	:	

* Please strike off whichever is not applicable

Other Requirements								
<input type="checkbox"/>	Gifts	___ Nos	<input type="checkbox"/>	Trophy	___ Nos	<input type="checkbox"/>	Bouquet	___ Nos

IQAC Number	:	
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Event Organizer

Signature of Section Head /
HOD / Dean

Approved by