

INDIAN INSTITUTE OF SCIENCE
BANGALORE – 560 012

Ref: _____

Date: _____

To

The Public Relations Officer
IISc.

Sub: Request for Accommodation at Guest House

CONFERENCE / SEMINAR / WORKSHOP

Name of the Program : _____

Type of Program : National International

Period of visit to IISc : _____ to _____

No. of rooms required : _____

Type of accommodation preferred : Double Room / Single Room / AC / Non AC

Payment details

By Guests

By IISc

If Institute Debit Head

Name of the Faculty Member with
Designation / Department

Signature of Faculty Member

Recommendation of
Chairman of the Department

PS: All the informations is required to be necessarily provided.

NOTE: 1. Any change in the program may be informed early.
2. The list of people to be accommodated may be sent atleast one week in advance.