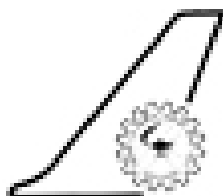


FORM A**NAL GUEST HOUSE ACCOMMODATION REQUEST**

E-Mail: abinguesthouse@css.nal.res.in

Ph No. 25086112

DATE:

FROM ☆

Emp No.

Division/Lab

Ph No/

E-Mail

ISO 9001:2000 certified

Purpose of Visit

Sl.No	Please Furnish all the guest details	Desig.	Relationship	Age	Gender

Guest Address:..... **PhNo/E-Mail:**.....

Arrival Date	Time in	Departure Date	Time out

For Forwarding Office Use

Signature ☆

Forwarding person Signature

HOD/COA

(with Lab seal)

For NAL Office Use

Group Leader, PRRM

Jt. Head, KTMD

Sr.COA _____ Adviser (M & A) _____

PS: 1) Guests are requested to produce ID cards & original request upon arrival at Guest House.
 2) Incomplete requests will not be entertained.
 3) **Form A** - for CSIR/other indian organisations

As per O.M. No. Sec. VI/GH/2002-03 Dated 11.12.02

Sl. No	Category	AC	NON AC
1.	CSIR Employees & Their family members	Rs. 25/-	Rs. 20/-
2.	Non officials/Expert Members invited for CSIR Work	Rs. 50/-	Rs. 40/-
3.	NRI / Foreigners	Rs. 500/-	Rs. 200/-
4.	NRI / Foreigners Students	Rs. 100/-	Not providing
5.	Non CSIR	Rs. 250/-	Rs. 100/-
6.	The guest house stay <u>for beyond seven days</u> for non-official members and family members of CSIR employees will be Rs. 500/- Per day/per Bed		

Rates Per day Per Bed