

Room Request Form



Add the details of main guest

Take a printout of this form, get it approved by the appropriate authority, and upload it to continue the booking process.

For Students :- Kindly get the filled room requisition form forwarded by the concerned warden

For Employees :- For booking under category 'B', please get the filled room requisition form forwarded by the concerned head or section incharge

Upload Room Allotment Form

Booking under category: D

राजस्वकारी OFFICIAL / व्यक्तिगत NON-OFFICIAL



मोतीलाल नेहरू राष्ट्रीय प्रौद्योगिकी संस्थान इलाहाबाद, प्रयागराज-211004
Motilal Nehru National Institute of Technology Allahabad, Prayagraj-211004

आधिकारी विकास केन्द्र (Executive Development Centre)

कम्ब आवंटन हेतु आवेदनपत्र (Application of room allotment)

नोट: अतिथि को कमा लेते समय फोटो पहचान पत्र प्रस्तुत करना अनिवार्य है। Phone - 0532-2271093, 7783907141

Note: The guest must produce Photo Identity Card at the time of room occupancy.

आवेदक का नाम / Name of applicant	Rajesh Tripathi
पद एवं विभाग / Designation & Department	Associate Professor (Computer Science & Engineering Department (CSED))
कर्मचारी सं० / Employee Code	89005

पता एवं फोन नं० / Address & Phone No.	B-17 Staff Colony MNNIT, Allahabad Prayagraj - 9452157497
अतिथि का नाम / Name of Guest	Shekhar Saroj
अतिथि का पता / Address of Guest	Dasepur harhua, Varanasi,Uttar Pradesh
अतिथि का मोबाइल नं० एवं ई-मेल / Mobile No. & Email of Guest	9452909947
अतिथि का आवेदक से सम्बंध / Relation with Applicant A (Institute Guest), B (Departmental Guest), C (Close Relatives of Faculty/Staff only) & D (All other than A, B & C)	D. All Other than A, B & C
साथ में आये व्यक्तियों का नाम एवं अतिथि से सम्बन्ध / Accompanying Persons & Relation	1. Name: Pratima Saroj Relation: Wife
किराया भुगतान (आवेदक/अतिथि) द्वारा/ Rent Paid by (Applicant/Guest)	Guest
आने की तिथि एवं समय / Check-in Date & Time	25-Sep-2025
जाने की तिथि एवं समय / Check-out Date & Time	26-Sep-2025
दिनों की संख्या/ Number of Days	01
कमरों की संख्या / umber of Rooms Required	01
रुकने का उद्देश्य (व्यक्तिगत/शासकीय) / Purpose of Stay	Non-official
तिथि / Date: 25/9/25	Rajesh Tripathi
समय/Place: 6:00 PM	आवेदक के हस्ताक्षर / Signature of Applicant

Forwarded By

- ग्राहकीय विभाग के द्वारा
- कृतिकारी विभाग / Academic Department /
- प्रीरक विभाग / Prerak Department /
- Registration/ECU / President
- SAU : for Official Booking

Executive Development Center

आवंटित कमरा नं ० (Room No.
Allotted):

द्वारा (By)

केयर टेकर (Care Taker):

प्रभारी अधिकारी
(Officer In-
charge)