



GOVT. OF NCT OF DELHI
MAULANA AZAD MEDICAL COLLEGE
LECTURE THEATER'S

And Associated Lok Nayak, Govind Ballabh Pant Hospital & Guru Nanak Eye Center,
2, B.S.Z. Marg, New Delhi-02

To,
The In-charge (Lecture Theater's)
Auditorium, Maulana Azad Medical College,
New Delhi-110002

BOOKING OF NEW / OLD LECTURE THEATER'S

Person Requisitioning (Name & Designation).....

Department ofMAMC/LNH.

Contact Number.....

E-mail ID.....

Event/Program.....
(Lecture/Workshop/conference/meeting)

Date of Booking(New /Old) Day's.....Timingam to.....pm

Signature of Applicant.....
(With Seal)

Forwarding and recommendation

Signature of HOD/ In-Charge /
(With Seal)

(Use for Lecture Theater's):-

Booking of Lecture Theater No.....New/Old) Timing of Booking.....
Date of Booking.....to..... Timingam.....pm

Dated..... Signature of In-charge

(Booking Confirmation Lecture Theater)

To ,
The Head of DepartmentMAMC, New Delhi
Booking of Lecture Theater No.....New/Old) Timing of Booking.....
Date of Booking.....to..... Timingam.....pm

Dated..... Signature of In-charge