

To,  
The Director  
PMNF Computer Centre  
A.M.U., Aligarh

Ref. No.: \_\_\_\_\_

Dated: \_\_\_\_\_

**Sub: Requisition for Resource Reservation for University Level On-line Meeting/ On-line Event**

<b>Information Disclosed by Event Organizer(s) for Scheduling of On-line Event/Online Meeting</b>		
1	On-line Event's Title:	_____
2	On-line Event's Commencement Schedule :	Date: _____ Time: _____
3	On-line Event's Duration ( # of Days):	Planned for _____-Day(s) { <b>One/Two</b> }
4	On-line Event's Duration (# of hours):	(No. of Hours/Day): _____
5	Total # of Participants, expected to attend on-line:	A maximum of _____ participants (excluding resource persons) are <i>expected</i> to attend, the on-line event.
6	Resource Persons Details:	To be provided in the worksheet labelled " <b>Resource Persons Details</b> " ( <b>Anx-1</b> )
7	<i>Participant Details*</i>	To be provided in the worksheet labelled " <b>Participant Details</b> " ( <b>Anx-2</b> )
<b>* To be provided after the Event Registration is Closed</b>		

Kindly examine our requisition and confirm reservation of On-line Event/Meeting Room, for our aforesaid requisition, subject to availability.

**Enclosure(s):** (i) Anx-1 (ii) Anx-2

Signature: _____	Name: _____
Department: _____	Designation: _____
E-Mail-ID: _____	Phone Number: _____

Ref. No.: \_\_\_\_\_

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**Anx-1 \***

Sr. No.	Name (of Resource Person / Presenter)	Designation	E-mail-ID (of Resource Person/Presenter)	Phone Number (of Resource Person/Presenter)
1				
2				
3				
4				
5				
6				

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Designation: \_\_\_\_\_

E-Mail-ID: \_\_\_\_\_

Phone  
Number: \_\_\_\_\_

\* ➔ Apart from hard-copy, soft copy of Anx-1 (Panelist details in aforesaid format) to be sent, as an attachment in spreadsheet-format only, by e-mail to [office.cc@amu.ac.in](mailto:office.cc@amu.ac.in) (at least 2-work-days before scheduled commencement of the event), giving dispatch reference number of DAK in subject of your e-mail

Ref. No.: \_\_\_\_\_

Dated: \_\_\_\_\_

## Anx-2 \*

Sr. No.	Name (of Participant / Attendee)	Designation	E-mail-ID (of Participant / Attendee)	Phone Number (of Participant / Attendee)
1				
2				
3				
4				
5				
6				
8				
...				
...				

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Designation: \_\_\_\_\_

E-Mail-ID: \_\_\_\_\_

Phone  
Number: \_\_\_\_\_

\* ➔ Apart from hard-copy, soft copy of Anx-2 (Attendee details in aforesaid format) to be sent, as an attachment *in spreadsheet-format only*, by e-mail to [office.cc@amu.ac.in](mailto:office.cc@amu.ac.in) (at least 2-work-days before scheduled commencement of the event), giving dispatch reference number of DAK in subject of your e-mail.