

UGC-Malaviya Mission Teacher Training Centre



BHARATHIDASAN UNIVERSITY

(Re-accredited by NAAC with A+ Grade)

Khajamalai Campus, Tiruchirappalli - 620 023, TN, India

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Faculty Guest House - Registration Form

(Please read the norms and regulations carefully.)

Name : _____
Sex : Male / Female
Designation : _____
InstitutionalAddress : _____

Phone (Office) : _____
Mobile Number : _____
WhatsApp Number : _____
E-mail ID : _____
Purpose of Stay : Participation in the _____ Faculty Induction Programme
Participation in the RC in _____
Participation in the STC in _____

Duration : From _____ a.m./p.m on _____
To _____ a.m./p.m on _____

ResidentialAddress : _____

Contacts, in case of emergency :

Name(s) : (1) _____ Mobile: _____
(2) _____ Mobile: _____

Physical Disabilities / Health Problems, if any: _____

UNDERTAKING

I undertake to abide by the norms and regulations of the UGC-HRDC Guest House of Bharathidasan University during my stay and cooperate with the authorities for the safe and peaceful stay of all the inmates.

Place:

Date:

Signature of the Participant

For Office Use only

No. :	Date :
Room Allotted :	Room Rent :
Receipt No. :	Remarks, if any :

Staff in-charge of
Guest House

Staff in-charge of
Cash Collection

Director