

Date : \_\_\_\_\_

Faculty Seating Allotment for New Joiner

Name (Dr./Mr./Ms.)

Designation :

Department :

Mobile No. :

**( Joiner/Faculty )**

=====

Seating allotted (Location) :

**Service Provider Copy to :**

- 1. Area Supervisors - Provide Cabin & Cabin Key
- 2. Server Room - Provide PC
- 3. Shri Hira Lal - Provide Phone and Phone Connection
- 4. Pantry - For Information
- 5. Security - For Information

**( Sr. Administrative Manager )**