

Wazir Agha Library

Reservation form for Discussion Room

Group leader name and Roll Number

Group leader Mobile Number and E-mail

Department

Date of Reservation

Time of Reservation

Group members name (All) and Roll numbers (Not more then Eight including team leader)

Purpose of Discussion

Please read the instruction carefully

Recommended by the chairman

(Sign & Stamp)

For official use only

Floor

Discussion Room number

Recommended by incharge DR: -----

