



APPLICATION FOR RESERVATION OF LECTURE THEATERS

To be filled in Duplicate

1. Name of the Department / Society / Function making the request :
2. Address :
3. Telephone No :
4. Name of Person making the request :
5. Position held in the Organization/Society :

6.

A. Name of the Hall (request to use) :	
B. Date/(s):	
C. Time : From	To
D. Purpose :	

I agree to pay the University of Colombo, Sri Lanka for any damage caused and also to pay the usual charges for the hall and hall keeper etc.

.....
Signature of Applicant Date

For Office use

<p><i>Recommendation of the Senior Treasurer of the Society concerned.</i></p> <p>Name of the Society:</p> <p>Name of the Senior Treasurer:</p> <p>..... Signature Date</p>	<p><i>Could be allowed for this purpose / could not be allowed for this purpose.</i></p> <p>..... Senior Student Counsellor Date</p>
--	---

The (name of the hall) is reserved for the above purpose on the date(s) mentioned above.

.....
Head / Senior Assistant Registrar Dept. Date

.....
Recommendation of the Dean

Allowed/ Not Allowed

Dean / Faculty of Science : Date :