	REQUISITION FORMAT
	DEPARTMENT COPY
Department:	
Details:	
	Telescontine wertherness /
	FRAGIYOTISH COLLEGE Signature of H O D (with Soal)
(To be filled by Office)	Signature of H.O.D. (with Seal)
Receipt Sl. No.:	Date:

	REQUISITION FORMAT
	OFFICE COPY
Receipt Sl. No.:	Date:
	(to be filled by Office)
Department:	े तेजस्विनावशीतमस्त
Details:	
	PRAGIYOTISH
	COLLEGE / /
	Signature of H.O.D. (with Seal)