

GENERAL REQUISITION FORM

DEPARTMENT DATE OF SUBMISSION

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NAME OF THE REQUESTER CONCEPT OF THE PROGRAMME

DATE OF THE PROGRAMME

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 TIME OF THE PROGRAMME

CATEGORY OF THE PARTICIPANTS

DEPARTMENT OF THE PARTICIPANTS

TOTAL NO OF PARTICIPANTS

TOTAL ESTIMATION EXPECTING

REQUIREMENTS FROM THE COLLEGE:

DEPT.HOD
PRINICPAL/VICE PRINCIPAL
FINANCE OFFICER
EXECUTIVE DIRECTOR

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