

Booking/Reservation through the email :- [guesthouse@jipmer.edu.in](mailto:guesthouse@jipmer.edu.in)

Grams: "JIPMER"  
Telex : 0469-244-JIP IN



Phone: 0413-2296582  
0413-2297461

**JAWAHARLAL INSTITUTE OF POSTGRADUATE MEDICAL EDUCATION AND  
RESEARCH, PUDUCHERRY- 605 006.**  
An Institution of National Importance  
(Under Ministry of Health & Family Welfare, Government of India)

**APPLICATION FOR ALLOTMENT OF ROOMS IN JIPMER GUEST HOUSE**

Date:

1. Name of the applicant (in Block letters) :
2. Designation :
3. Department :
4. Contact Phone Nos. : Res/Mobile Office:
5. Name of the occupant (Guest) with full address :
  
6. Relationship with the applicant :
7. Purpose of visit :  
If official copy of the tour dairy/order
8. Date & Time of Occupation :
9. Date & Time of Vacation :
10. Number of rooms required :
11. Whether A/C or Suite/ Dormitory :

SIGNATURE OF THE APPLICANT

**Under taking**

I AM DR/SRI/SMT .....WORKING AS A

..... IN THE DEPT OF

....., JIPMER, PUDUCHERRY-6 HEREBY UNDERTAKE THAT:

1. I have read all the terms and condition of guest house and I abide them.
2. I may be allotted the rooms subject to availability only.

Room No. ....

may please be allotted for Official/ Staff Rent basis

SIGNATURE OF THE  
APPLICANT

OFFICE IN CHARGE