



NATIONAL CENTRE FOR PHYSICS
HOSTED RESEARCHERS
ACCOMMODATION VACATION PROFORMA

PART-I (to be completed by Applicant Hosted Researcher)

Name of Hosted Researcher: _____ Date of Application: _____

Registration No. #: _____ NCP ID Card No. _____

Department at NCP: _____ Date of Expiry of Stay at NCP as per ToRs _____

Period of Stay: w.e.f. _____ to _____

Contact Phone Nos. Cell: _____ Res. _____ Lab. _____

Registered University/Institute/Organization: _____

Hostel Type: (MOQ / BOQ): _____ Room No. _____

Signature of Applicant _____ Signature of Supervisor/Co-Supervisor: _____
(with date)

Signature of Concerned Director: _____
(with date)

PART-II (for Official Use): Action by A&IA Branch-CAAD:

JE (A&IA): _____ Manager A&IA: _____
(to vet above registration contents of Hosted Researcher)

Director CAAD _____
(to forward the application to Finance Department)

PART-III (for Official Use): Action by Finance Branch:

Hostel Charges paid till: _____

Dues pending (if any):- No of Months: _____ Amount: _____

Signature JA/JE Finance: _____ Manager Finance: _____

PART-IV (for Official Use): Action by Estate Branch:

1. Remarks of Caretaker to indicate breakage/damage/missing items in Room(if any):

2. Signature of Caretaker: _____ Signature of JA/JE Estate: _____

3. Signature Manager Estate: _____ Director Admin: _____

Note: Copy to Finance Branch & CAAD (A&IA Branch) for record, please.