

Amrita School of Engineering, Bengaluru

Memento Request Form

1. Name of the Event :
2. Organized by :
3. Date(s) of the Event :
4. No. of Memento(s) required :

Sl. No.	Name of the Guest	Name of the Organization	Time & Date on which Memento is required
1			
2			
3			
4			
5			

Name of the Indenter :

Department :

Signature :

.....
Signature of HoD/Chairman

Date :

Date :

To : **Facilities Department**

Kindly provide the required number of **Normal / Customised** Mementos to the Indenter one day prior to the date mentioned above.

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Associate Dean

Date :