

JSMU Visiting Cards Request

Name: _____

Designation: _____

Qualifications: (if required to print): _____

Landline no.: _____

Mobile no.: _____

Official email: _____

Personal email (if required): _____

Any other details: _____

Signature: _____

Date: _____

To be filled by HR

Verified designation: _____

Approved: _____

Received by Publications and Media Cell:

Signature and Date: _____

Sent to Procurement: _____

Received by Procurement Department:

Signature and Date: _____

Returned to Applicant: _____