

Shaheed Raiguru College of Applied Sciences for Women शहीद राजगूरु कॉलेज ऑफ एप्लाइड साइंस फॉर वीमेन

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GATE PASS

					Dated –	
Name	of company –					
Vehic	e No. –					
Date –			Time –			
Name of the person –			Mobile No. –			
Signat	ure –					
Note -	- Allowed to take the following	g items.				
.No.	Item	Model No.	Serial No.	Quantity	Remarks	
	of Department –					
Name	of Dealing Incharge/ Official	_				
Signat	ure –					
						Caretaker
Pass OUT time –		Date –				
Pass IN time –		Date –				
Name of security in – charge –						
Signat	ure of security in – charge –					