

ALIGARH MUSLIM UNIVERSITY

Application for Vehicle Pass (For Employees) Session 2019-20

1.	Name of the Applicant	
2.	Designation	
3.	Employee ID Number (Enclose copy of ID Card)	
4.	Department/Section	
5.	Phone/Mobile Number	

6. Details of the vehicle(s)					
S.No	Type (Car/Motorcycle/ Scooter/Cycle)	Vehicle Registration Number	Make & Model	Color	Pass Number (For Office Use)

I hereby affirm to abide by the rules/regulations/guidelines notified by the University from time to time.

(Signature of applicant)

----- FOR OFFICE USE -----

Total Amount Received (Rs.) _____ Cash receipt number _____

(Signature of cashier)