



# INTERNAL QUALITY ASSURANCE CELL

## MAZBAT COLLEGE

MAZBAT, DISTRICT-UDALGURI, BTR, ASSAM-784507

### FORMAT FOR ADVANCE INTIMATION FOR ORGANIZING IN-HOUSE ACTIVITIES/EVENTS

NAME OF THE ACTIVITY/EVENT			
ORGANISED BY			
NAME(s) OF COORDINATOR(s)			
PROPOSED DATES			
VENUE		TIME	
BRIEF DESCRIPTION OF THE ACTIVITY/EVENT			
PARTICIPANT DETAILS			

Counter Signature by Principal

Signature (s) of the Event Coordinator(s)

Signature & Seal of IQAC Coordinator

Receipt Sl. No: \_\_\_\_\_ Date of Receipt: \_\_\_\_\_

**(For office use)**