

# United International University

## UIU TRANSPORTATION SERVICE

### Application for availing the Service

<b>Name of Faculty/Staff:</b>	
<b>Designation with School/Dept./Instt.:</b>	
<b>Contact No.:</b>	
<b>Contact Point*:</b> (from where you intend to board on the Microbus)  <b>*Contact point should be chosen from the line of routes mentioned in the Memo.</b>	

Signature of Applicant:

Approved by:

Date:

Date:

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