## Serampore College

## College/Carey Cemetery Visitation Form

Date of Request:

To, The Principal, Serampore College, Serampore, Hooghly.	3
1. Requester's Name (attached name's list if more than 07): (i)	
(ii)	(iii)
(iv)	
(vi)	(vii)
2. Mobile No.:	
3. Email id:	
4. Any Govt. id No. (preferably Aadhar no.):	
5. Date of Visit: I	Ouration of the Visit:
6. Place(s) of Visit: (i) College Campus [ ] (ii) Carey Museum [ ] (iii) Carey	
Cemetery [ ](iv) Library [ ] (v) Other (please mention the name)	
7. Purpose of the Visit:	
8. Contact/Known Person in College(if any):	
Visitor's Signature SAPIEN	Permitted [ ] Regretted [ ]
The Wise Shall Pesses	Rev. Dr. Subhro Sekhar Sircar Principal (Acting)
00.	
C.C.: 1. Gate Security [ ]	

3. Guard, Carey Cemetery [ ]