**Requisition Form for Vendor Creation**

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| Type of Vendor | Evaluator ( ) Evaluator ID :**(If Evaluator is a IGNOU Employee, Give EMP ID )**Paper Setter ( )**(If Evaluator is a IGNOU Employee, Give EMP ID )**Outside Party ( ) One Time Vendor ( )  |
| Name |  |
| Withholding | EWF – Employee Welfare Fund ?INDIT – Income Tax(TDS) Authority ?* Class :
* PAN No. :
 |
| Address  | \*Address 1 :Address 2 :\*City : \*State : \*Pin Code :Email ID : |
| Requester Detail | Name : EMPID : DIV/Sch./Unit/Oth. :Designation :Intercom No :Date : |

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