



No. ICMR/NITM/2024-25/Adm/

Dated: 23-01-2025

GUEST HOUSE POLICY

About us

The Indian Council of Medical Research (ICMR) is India's apex body for biomedical research, dedicated to translating scientific discoveries into actionable health solutions. With a focus on generating, managing, and disseminating knowledge, ICMR addresses critical health challenges, particularly those affecting vulnerable and marginalized communities.

ICMR promotes innovation in diagnostics, treatments, and vaccines, harnessing modern biological tools to advance public health. By strengthening research infrastructure and human resources, especially in medical colleges and health institutions, it fosters a culture of scientific inquiry. Committed to bridging the gap between medical research and public health implementation, ICMR ensures that cutting-edge innovations benefit society at large.

The guest house facility at ICMR Institutes and Headquarters ensures the appropriate standards of safety and security, supported by stringent measures aligned with GFR 2017 norms. With a moderate security cover in place, including a mix of ex-service or ex-paramilitary personnel and trained civilian staff, guests can rely on a secure and well-protected environment.

Procedure for Guest House Booking at ICMR-NITM

1. Submission of Booking Request:

- All booking requests must be submitted through official communication (either by email or letter) from the concerned department or institution. Requests can be sent to director.nitm@icmr.gov.in
- Oral or telephonic requests will not be considered unless followed up with a formal official communication.

2. Personal Stays:

- Requests for personal stays will only be entertained under exceptional circumstances and require prior approval from the Director.

3. Advance Booking Requirements:

- Guests are advised to submit their booking request at least 7 days in advance to facilitate processing of the request. Kindly note that the institute is closed on Saturday and Sunday.
- The request should include comprehensive details, such as:
 - Full name of the guest(s)
 - Designation and institution/organization
 - ID card number
 - Purpose of visit
 - Number of rooms.
 - Details of accompanying persons including driver details (if any)



- Duration of stay in the Guest House (check-in and check-out dates) with anticipated time
 - Contact details (email and phone number)
 - All the details should be submitted in the prescribed format provided in **Form-1 (GHF-1)**.
4. **Booking Confirmation:**
- Once the request is processed, a confirmation of booking will be communicated to the guest via email.
5. **Walk-in Accommodation:**
- Walk-in requests for accommodation are generally not encouraged. However, under special circumstances, they may be considered subject to:
 - Availability of rooms
 - Approval from the Guest House Manager and/or the Director, ICMR-NITM
 - Submission of GHF-1 details at the time of check-in.
6. **Check-In Requirements:**
- All guests must produce the valid Government-issued ID card whose details have been provided during booking at the Main Gate and/or during the check-in process.
 - Guests are requested to cooperate with the security staff for verification purposes.
7. **Additional Guidelines:**
- The Guest House is primarily intended for official visits of Scientists and technologists. Any non-official bookings, if permitted, will be strictly at the discretion of the Director.
 - Guests are expected to adhere to the house rules during their stay.
 - In case of any changes to the booking (e.g., extension, cancellation), guests must promptly inform the Guest House Manager.
8. **Feedback Submission:**
- Guests are encouraged to share their feedback, suggestions, or grievances regarding their stay upon checking out of the Guest House.
 - A designated feedback form will be readily available at the Guest House reception to facilitate this process.
9. **Contact Information:**
- For inquiries or submission of requests, guests may contact the Guest House Manager at the provided official email address or phone number.

-Sd-
Administrative officer



GHF 1

Guest House Request Form

Date: _____

Booked by:

Name : _____

Designation : _____

Institute : _____

Institute ID card Number / Aadhar Number: _____

Number of Rooms Required: _____

Guest Details:

Sr. No	Name	Age	Gender	ID Proof
1				
2				
3				
4				
5				

***Driver details to provide if accommodation is required.**

Visit Information:

- Purpose of Visit: _____
- Duration of Stay: From Date & Day: _____ Time _____
To Date & Day: _____ Time _____
- Please provide scanned copies of IDs. The same has to be shown for verification at check in time.

Declaration:

I hereby declare that the information provided is true to the best of my knowledge.

Signature of the Applicant

Date: _____

For Office use only:

Approved By: _____

Remarks (if any) : _____

Signature and Seal: _____



Guest House Feedback Form

Date: _____

- Name : _____
- Room No : _____
- Date : _____

Check in Experience	Excellent	Good	Fair	Poor
Cleanliness				
House-keeping				
Staff Service				
Amenities				
Overall Ratings				

Other Comments:

Signature of the Guest