ALLAMA IQBAL OPEN UNIVERSITY
Registrar’s Department
(Training & Development Section)
Requisition for Sending Mail through
DISPATCH RIDER

Req. No. ____________

1. Name & Designation of
   Requisitioning Official: ____________________________

2. Department: ________________________________

3. Name & Address to whom being sent:
   ________________________________

4. Description of Document:
   Official
   Personal (Please Specify)

5. Nature of Document:
   Most Urgent
   Same Day Delivery
   Normal

6. Target date/time of Delivery: ____________________________

Signature of the Requisitioning Officer/Official
Date: ____________

Signature & Stamp of Head of Department
Date: ____________

Signature of DR Section
Date: ____________

To be used by Dispatch Rider

Requisition Received on Date/Time: ____________________________

Mail Delivered on Date/Time: ____________________________

Name & Signature of Recipient: ____________________________

Signature of DR: ____________________________