



**Public Officers' Welfare Council**  
*Promoting the welfare of Public Officers and their families*  
**6<sup>th</sup> Floor, Atom House, 16, Royal Street, Port Louis**  
Tel: 208 6658 / 208 0157 Fax: 208 6659 Email: powc@govmu.org  
Website: http://powc.govmu.org

**APPLICATION FOR USE OF CIVIL SERVICE HOUSE (CSH) - Quarter B12**

Name of Ministry/ Department/  
SWA/ Public Officer: .....

Address: .....

Name of Responsible Officer for  
the event: .....

Telephone No.: ..... Mobile No.: .....

Fax No.: ..... Email: .....

**Purpose for use. Tick  where appropriate, please.**

Workshops  Meetings  Seminars  Brainstorming sessions  Events

Others (give details): .....

Date to be booked: ..... Number of persons: .....

Duration: From ..... hours to ..... hours

***I confirm by signing this application form that I have taken cognizance of the Conditions for Use of the CSH and will adhere to the said conditions.***

Name of Applicant: .....

Designation: .....

Signature of Applicant: ..... Date: .....

**Ministries, Departments and Staff Welfare Associations**

**For office use only**

Monday to Saturday		Amount (Rs.)
Full day (0900 hours to 1600 hours)	Rs. 1000.00	
Half day during weekdays [(3 hours) 0900-1200 or 1300-1600 hours]	Rs. 500.00	

Receipt No.: .....

Amount Paid: .....

**Organisation of events by Public Officers**

**For office use only**

Monday to Sunday		Amount (Rs.)
From ..... hours to ..... hours (Up to a maximum of 5 hours)	Rs. 2500.00	
Refundable deposit	Rs. 2500.00	

Receipt No.: .....

Amount Paid: .....