

FORE School of Management
Cases and Simulation Requisition Form

Programme:

Course Credit:

Term-

Course (Please ✓ below)		Purpose (Please ✓ below)		Course Duration			
Core	Elective	Examination	Classroom Teaching	From:	To:		
Name of Faculty							
1		3		4	5	6	7
S. No	Course Name	Title, Author, & Publication details		Product No.	No. of pages	Total registration	Qty. required

Name and Signature of the Faculty:

Date:

The Cases requisitioned above are as per the case procurement norms and within the maximum limit.

(Type the Name)
Executive (Academics)

(Type the Name)
Manager (Academics-I)

(Type the Name)
Dean (Academics)