

..... RAILWAY CM257  
**RESERVATION/CANCELLATION REQUISITION FORM**

If you are a Medical Practitioner

Please tick ( ) in Box

Dr. [ ]

(You could be of help in an emergency)

Train No & Name \_\_\_\_\_ Date of journey \_\_\_\_\_  
Class \_\_\_\_\_ No of Berth/Seat \_\_\_\_\_  
Station from \_\_\_\_\_ To \_\_\_\_\_  
Boarding at \_\_\_\_\_ Reservation upto \_\_\_\_\_

S.No.	Name in Block letter(not more than 15)	Sex(M/F)	Age	Concession/Travel Authority No.	Choice if any
					Lower/Upper berth
					Veg./Non veg. Meal for Rajdhani/ Shatabdi Express Only

**CHILDREN BELOW 5 YEARS (FOR WHOM TICKET IS NOT TO BE ISSUED)**

S.No.	Name in Block Letters	Sex	Age

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**ONWARD/RETURN JOURNEY DETAILS**

Train No. & Name \_\_\_\_\_ Date \_\_\_\_\_  
Class \_\_\_\_\_ Station from: \_\_\_\_\_ To \_\_\_\_\_  
Name of applicant \_\_\_\_\_  
Full Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of the Applicant/Representative**

Telephone No., if any \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

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**FOR OFFICE USE ONLY**

S.No. of Requisition \_\_\_\_\_ PNR No. \_\_\_\_\_  
Berth/Seat No. \_\_\_\_\_ Amount collected \_\_\_\_\_

\_\_\_\_\_  
Signature of Reservation Clerk

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- Note : 1.Maximum permissible passengers is 6 per requisition.  
2. One person can give one requisition form at a time.  
3. Please check your ticket and balance amount before leaving the window.  
4. Forms not properly filled or in illegible forms shall not be entertained.  
5. Choice is subject to availability