

**SREE CHITRA TIRUNAL INSTITUTE FOR
MEDICAL SCIENCES & TECHNOLOGY, TRIVANDRUM**
Application for Leaving Station/Headquarters (Foreign Visits)

1) Name :

2) Employee Code:

3) Designation:

4) Department/Division :

5) Pay & Pay level:

6) Date of Joining :

7) Date of Retirement/Relieving:

8) Passport No:

(Copy of passport is to be submitted)

9) Visa Details:

10) For issuing NOC for Visa:

a) Date of leaving India:

b) Date of returning to India:

11) Details of Foreign Travel to be undertaken (Copies of relevant papers to be submitted)

Period abroad		Name of Foreign Countries to be visited	Purpose	Estimated Expenditure (Travel, Boarding/Lodging, Visa, Misc etc)	Remarks
From date	To date				

12) Source of Fund in detail :

Item	Amount	Source of Fund
Registration Fee	Rs.	
Air-Fare	Rs.	
Visa fee	Rs.	
Hotel accommodation charges	Rs.	
Per-diem	Rs.	
Medical Insurance Premium	Rs.	
Any other item	Rs.	
a).....		
b).....		
c).....		

13) Details of previous foreign travel including private foreign travel, if any undertaken during the last 4 years.

Period abroad		Name of Foreign Countries visited	Purpose	Estimated Expenditure (Travel, Boarding/Lodging, Visa, Misc etc)	Source of Funds
From date	To date				

Undertaking :

I undertake that I will return to India on the expiry of my leave and will not accept any job or join any course during the period of my stay abroad, failing which I will be liable to disciplinary action.

I will furnish the FCRA clearance details as per the rules applicable.

Signature of the applicant

Name.....

Date.....

Email id.....

Mobile Number.....

Remarks of HoD(including the details of alternate work arrangements made)

Signature of HoD.....

Remarks of P&A Division

UDC/EA

AAO

AO GR.I

Deputy Director(Admin)

Orders of the Sanctioning Authority

SANCTIONED / NOT SANCTIONED

DIRECTOR