WBEIDC LTD

TOUR APPROVAL FORM

Name of the Employee :_____

Employee Code No. :_____

Designation :_____

Project Name :_____

Project Code :_____

Purpose of Visit :_____

Journey (Destination) :_____

Tour Period: Date of Departure :_____/ _____/_____

Date of Return :_____/ _____/_____

Mode of Travel (Train/Air) :_____

Advance Required :_____

Signature of the Employees :_____

Date :_____/ _____/_____

Recommendation of the Departmental Head :_____

Approval of the Competent Authority :_____

(Executive Director/Managing Director)

Note: *This form will have to be sent to P&A Department at least 3 (Three) days before the journey date, in case of Air Travel, otherwise 7 days before for travel by train.*