



अखिल भारतीय आयुर्विज्ञान संस्थान (एम्स), गुवाहाटी

All India Institute of Medical Sciences, Guwahati

स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के तत्वावधान में एक स्वायत्त निकाय
(An Autonomous body under the aegis of Ministry of Health and Family Welfare, GoI)

चांगसारी, गुवाहाटी, असम - 781101

Changsari, Guwahati, Assam – 781101

PROFORMA FOR THE TAKING PRIOR PERMISSION BY GOVERNMENT SERVANTS FOR PRIVATE VISITS ABROAD

***Part A – To be filled by the Government servant applying for visit abroad**

1. Name and Designation: _____
2. Pay: _____
3. Ministry / Department: _____
4. Passport No: _____
5. Details of Private foreign travel to be undertaken:

<i>Period of travel</i>	<i>Name of foreign countries to be visited</i>	<i>Purpose</i>	<i>Estimated expenditure (travel, boarding, lodging, visa, misc, etc)</i>	<i>Source of funds</i>

6. Details of Private foreign travel undertaken during the last four years.

<i>Period of travel</i>	<i>Name of foreign countries visited</i>	<i>Purpose</i>

Signature

Date:

.....
(_____)
Name and Designation

DECLARATION IN CONNECTION WITH FOREIGN VISIT

(To be filled by the incumbent) *

1.	Name of the officer	:	
2.	Service of the officer / Department	:	
3.	Designation	:	
4.	Name of the country / countries to be visit	:	
5.	Period of the proposed visit with specific dates	:	
6.	Purpose of the visit	:	
7.	Nature of the visit (official /private)	:	
8.	Who will bear the cost of air fare i) if self, mention source like salary saving etc. or ii) if organization, details thereof, or iii) if individual, state the name, nationality and relation with the officer	:	
9.	Who will bear the cost of board and lodging and travel during visit i) if self, mention source like salary saving etc. or ii) if organization, details thereof, or iii) if individual, state the name, nationality and relation with the officer	:	
10.	Whether the officer will accept foreign hospitality during his/ her stay abroad, if so, details thereof,	:	
11.	Whether the officer will accept any foreign employment/ profession during his/ her stay abroad, if so, details thereof	:	
12.	Whether the officer will undergo any foreign training/ workshop / seminar etc. programme while stay abroad, if so, details thereof	:	
13.	Whether the officer will accept any scholarship/ award etc. in connection with his/ her visit abroad	:	

I undertake that :-

- 1) I shall not visit abroad unless I get permission from the Government; and
- 2) I shall return and resume my official duty immediately after expiry of leave to be granted for the purpose .

The above statements are true to the best of my knowledge and, if shall be personally liable for the same.

Date :

Signature:

PROFERMA FOR APPLICATION FOR PRIVATE VISIT (ANNEXURE-I)

1. Name :
2. Designation :
3. Pay :
4. Office (specially Department/
Directorate/ Undertaking/
Corporation etc.) :
5. Passport No. :
6. Details of private foreign travel to be undertaking:

Period of abroad		Names of the foreign countries to the visited	Purpose	Estimated expenditure (Travel, board / loading, visa, misc. Etc.)	Source of Funds*	Remarks
From	To					

7. Details of previous private foreign travel, if any undertaken during the last four years (as under item No. 6)

Name :

Designation :

Date :

*In case of foreign funding which comes under purview of the FCRA, 1976 clearance from the Ministry of Home Affairs, Government of India is required to be obtained.

Permission to visit foreign countries in private capacity (Annexure II)

No.

I (Name of leave sanctioning authority)

..... posted as(designation)

hereby authorize (Name of applicant)

posted as(designation of applicant)

to visit (Name of countries)for the period

..... in his / her private capacity.

She / He has been granted.....(nature of leave) for the period

..... for this purpose.

Date :

Signature :

Copy for information to :

1. Cadre controlling authority.

