

**APPLICATION FOR PERMISSION FOR FOREIGN VISIT OF STATE GOVERNMENT OFFICERS**

1. Name :
2. Designation :
3. Name of the foreign Country/countries:  
Proposed to be visited
4. Period of the visit :
5. Mode of leave : a) Earned leave w.e.f.....to.....  
Prefixing:  
Suffixing:  
b) Casual leave for ..... days on .....  
.....  
With HQ leave permission w.e.f. .... to .....

6. Purpose of visit :
7. Name of the person (s) / Organization :  
to be visit and its relationship with the  
Officer. Complete address and contact  
numbers (including e-mail) of the host,  
if any , may be specified

8. Total estimated expenditure and :  
Source of funding
9. Status of submission of assets and :  
liabilities statement

10. Particular of dependent family :  
Member accompanying the office  
during the visit

| <u>Sl. No.</u> | <u>Name</u> | <u>Age</u> | <u>Relation with the officer</u> |
|----------------|-------------|------------|----------------------------------|
| 1.             |             |            |                                  |
| 2.             |             |            |                                  |
| 3.             |             |            |                                  |
| 4.             |             |            |                                  |

11. a) Details of hospitality, if any, proposed:  
to be availed during the visit  
b) Attach sponsorship document(s), if :  
applicable
12. Details of private foreign travel during :  
last three years, if any  
(enclose a separate sheet, if necessary)

**Remarks**

**Signature:**

**Date:**

**ANNEXURE - "A"**  
**PROFORMA**

- |                           |                              |
|---------------------------|------------------------------|
| 1. Name of Govt. Servant  | - Signature of Gov. Servant  |
| 2. Name of Family Members | - Signature/Thumb Impression |
| 3. Name of Govt. Servant  | - Signature of Gov. Servant  |
| 4. Name of Family Members | - Signature/Thumb Impression |

- |             |             |
|-------------|-------------|
| <b>I.</b>   | <b>I.</b>   |
| <b>II.</b>  | <b>II.</b>  |
| <b>III.</b> | <b>III.</b> |
| <b>IV.</b>  | <b>IV.</b>  |
| <b>V.</b>   | <b>V.</b>   |
| <b>VI.</b>  | <b>VI.</b>  |

- |                                |    |
|--------------------------------|----|
| 5. (I) Date of Departure       | :- |
| (II) Time of Departure         | :- |
| (III) Mode of Journey          | :- |
| 6. (I) Declared place of Visit | :- |
| (II) Date of Arrival           | :- |
| (III) Mode of Journey          | :- |

7. Dated initial of controlling Officer

***Signature of Applicant***