

## HOMI BHABHA CENTRE FOR SCIENCE EDUCATION

### TRAVEL FORM FOR STUDENTS

1. NAME OF THE PROGRAMME : \_\_\_\_\_
2. NAME OF CANDIDATE : \_\_\_\_\_
3. ADDRESS (Place of residence/ hometown from where the journey starts) : \_\_\_\_\_
4. Mobile no.: \_\_\_\_\_ Email address: \_\_\_\_\_
5. RAILWAY STATION NEAREST TO PLACE OF RESIDENCE/ HOME TOWN : \_\_\_\_\_
6. DETAILS OF JOURNEY : \_\_\_\_\_

Particulars of Journey	Departure			Arrival			Mode of Travel (i.e. by bus/ train etc.)	Fare Paid Rs.	For Office Use only
	Date	Time	From	Date	Time	To			
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
ONWARD JOURNEY UPTO									
LOCAL CONVEYANCE *									
RETURN JOURNEY									
LOCAL CONVEYANCE *									
TOTAL RS.									

Amount Spent on

a) Food Rs. \_\_\_\_\_

b) Lodging Rs. \_\_\_\_\_  
(Please attach bills)

\* Local Journey means actual bus/auto fare between  
Railway / bus station and venue of training / residence.

DATE : \_\_\_\_\_

(SIGNATURE OF CANDIDATE)

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Certified that the above student has actually attended the programme from \_\_\_\_\_ to \_\_\_\_\_. His claim may be drawn as per rule.

Faculty Co-ordinator

Accounts Officer 'D'

Authorised Signatory

Received Rs. \_\_\_\_\_ (\_\_\_\_\_)

SIGNATURE OF CANDIDATE