



राष्ट्रीय औषधीय शिक्षा एवं अनुसंधान संस्थान—हाजीपुर

NATIONAL INSTITUTE OF PHARMACEUTICAL EDUCATION AND RESEARCH (NIPER) - HAJIPUR

(Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers, Govt. of India)

Export Promotions Industrial Park (EPIP), Industrial Area, Hajipur

Dist: Vaishali, State: Bihar, India, PIN: 844102 Website: www.niperhajipur.ac.in

Application form for grant of L.T.C.

1. Name of the Government Servant :
2. Designation :
3. Date of entering the Central Govt. Service :
4. Present Pay :
5. Whether permanent or temporary :
6. Home town as recorded in the Service Book :
7. Whether the concession is to be availed for Visiting
(a) Home Town :
(b) Anywhere in India, the place to be visited :
(c) Block for which LTC to be availed :

8. Person in respect of whom LTC is proposed to be availed:

Sl. No.	Name	Age	Relationship

9. Mode of travel :
10. Amount of advance required (Attach estimate) :
11. Proposed date of journey :

Declaration to be given by the Government Servant

I declare that

- (i) The particulars furnished above are true and correct to the best of my knowledge.
- (ii) I have not submitted any other claim so far for Leave Travel Concession in respect of myself or my family members in respect of the first block of four years.
- (iii) My husband/wife is not employed in Government Service.
- (iv) My wife/husband for whom LTC is claimed by me is not employed in any Public Sector Undertaking/Corporation/Autonomous Body financed wholly or partly by the Central Government or a Local Body, which provides LTC facilities to its employees and their families.

Date

Signature of Applicant

GRANTED



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Certificate to be given by the Controlling Officer

CERTIFIED –

- (i) *That Shri/Smt./Kumari has rendered continuous service for one year or more on the date of commencing the outward journey.*
- (ii) *That, necessary entries as required under Para. 3 of the Ministry of Home Affairs, O.M. No. 43/1/55-Ests. (A), Part-II, dated the 11th October, 1956, have been made in the Service Book of Shri/Smt./Kumari*

Signature and Designation of the
Controlling Officer