

APPENDIX – 16

APPLICATION FOR PRIOR PERMISSION TO BE OBTAINED BY PUBLIC OFFICERS TO TRAVEL ABROAD.

Part 1

| | | | | | | | |
|----------|-------------|---|--|-------------------|--------------|---------------------|---|
| 1 | 1.1 | Name | | | | | |
| | 1.2 | Post | | | | | |
| | 1.3 | The service to which the Officer belongs | | | | | |
| 2 | 2.1 | Date of Birth | Date | Month | Year | | |
| | 2.2 | NIC Number | | | | | |
| 3 | 3.1 | Ministry / Provincial Council | | | | | |
| | 3.2 | Department / Institution | | | | | |
| 4 | 4.1 | Arrangement made to cover up duties / Acting arrangements | | | | | |
| 5 | 5.1 | Purpose of travel / Field of training | | | | | |
| | 5.2 | Nature of travel | Official | | Private | | |
| | 5.3 | In the case of training the awarding agency | | | | | |
| | 5.4 | How expenses are mainly to be met (Mark in a cage) | Through Department of External Resources | Through a project | Direct award | Private Funds | Government of S.L. |
| | 5.5 | If met from GOSL Funds Nature and amount | Air Travel | Subsistence | Course Fees | Additional Expenses | Other personal expenses (to be specified) |
| | 5.6 | In case of a foreign loan / project particulars thereof | | | | | |
| | 5.7 | Date of commencement of course / training | | | | | |
| | 5.8 | Date of completion | | | | | |
| | 5.9 | Date of departure and return | | | | | |
| | 5.10 | Countries to be visited | | | | | |
| | 5.11 | Foreign address, telephone, fax, E-mail, indicating numbers | | | | | |

5.12 Has the report on the previous official trip been submitted

6 Particulars of foreign travel of applicant during the current year and preceding three years

| Year | Purpose of travel | Period | Country |
|------|-------------------|--------|---------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

6.1 Will the Minister of the Ministry concerned be away from the country during the relevant period (Information to be furnished in the application of Secretaries to Ministries only)

7 Declaration by applicant

I certify that the particulars furnished in this application are true

Date:.....

.....
Signature of the applicant

Date:.....

.....
Head of the Department

Date:.....

.....
Dean of the Faculty

8. Recommendation of the Head of the Institution to the Secretary of the Cabinet Ministry

Ref. No. of Department ;.....

Ministry of

Arrangements have been made to cover up duties of this Officer / Acting arrangements have been made

Recommended and Forwarded

Date:.....

.....
Signature, Name and Official stamp of
Head of Institution

Part 2(a)

Recommendation of Head of Department / Recommendation of the Chief Secretary of the Provincial Council

Ref. No. Ministry / Department / Provincial Council;.....

Secretary to the President / Secretary to the Prime Minister / Secretary to the Governor

This Nomination has been approved by the Hon. Minister

.....Hon. Governor Province.
Arrangements have been made to cover up duties / Acting arrangements have been made.

Submitted for prior permission of his Excellency the President / Prime Minister / Hon. Minister / Hon.
Governor

Date:.....

.....
Signature of the Head of Department /
Secretary to the Ministry /
Chief Secretary of Provincial Council
Name and Designation