



APPLICATION FOR PERMISSION FOR EXCURSIONS/TRIPS
(ORGANIZED BY THE STUDENTS/STUDENT SOCIETIES/UNIONS)

Important:

The duly filled application should be forwarded to the Deputy Vice-Chancellor through the Student Services Division for approval at least 07 days prior to the date of the event. The letter of approval will be issued by the Student Services Division.

I.....of the
Society/ Union solicit your kind approval to proceed on this excursion/trip, details of which are given below for your perusal please.

01	Place of Visit			
02	Route of journey		Distance (Km)	
03	Route of return journey		Distance (km)	
04	Date of departure		Time of departure	
05	Anticipated time of reaching the destination			
06	Date and time of return to the University			
07	No.of Buses		Vehicle No's	
08	No. of Participants (Attach 02 copies of the detailed list)	Female		Male
09	Address & other particulars of lodging, if staying overnight			

10. Details of the Applicant

Name :		Department/ Faculty:	
Position:		Hall of residence:	
Registration No:		Mobile:	

By signing this, I take the responsibility of being responsible for this excursion/trip. Any changes in the plans of this excursion/ trip will be duly notified to the Deputy Vice-Chancellor. The organizers will take full responsibility for the discipline and safety of the students participating in this excursion/trip.

.....
Date

.....
Signature



11. Details of the Lecturer in charge of the excursion /trip

The Lecturer in charge of the Excursion/Trip should be a permanent member attached to the University of Peradeniya)

Name:	
Department/Faculty:	
Mobile No:	

I hereby declare that I will accompany the group and take responsibility of the participants and the properties.

.....
Date **Signature**

12. Details of the lady lecturer in charge of the excursion /trip
(The Lecturer should be a permanent member attached to the University of Peradeniya)

Name:	
Department/Faculty:	
Mobile No:	

I hereby declare that I will accompany the group and take the responsibility of the participants and the properties.

.....
Date **Signature**

13. If organized by a registered Students' Society/Union

The above excursion/trip is recommended /not recommended as it is within the objectives of the Society/Union			
Name:			
Department/Faculty:			
Telephone No:			
Signature of the Senior Treasurer		Date	

The above excursion/ trip is recommended and forwarded for approval.
Obtain the recommendation based on the event



Recommendation of the Chief Marshal

Recommendation is provided/ not provided for the above excursion / trip.

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If a Faculty event

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Dean

Date /

If University Common event

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Proctor

Date /

Recommendation of the Student Services Division

Date:..... Senior Assistant Registrar / Assistant Registrar
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Approval of the Deputy Vice-Chancellor

The above excursion / trip is approved

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Date

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Deputy Vice-Chancellor