

**NORTH EASTERN REGIONAL INSTITUTE OF  
WATER AND LAND MANAGEMENT  
DOLABARI, P.O. KALIABHOMORA  
TEZPUR - 784 027**

FORM T-1

**TOUR APPROVAL**

NAME : .....

DESIGNATION : .....

MODE OF TRANSPORT : INSTITUTE VEHICLE / PUBLIC VEHICLE

Proposed departure		Place of visit	Date of Halt		Expected Arrival		Purpose	Remarks
Date	Time		From	To	Date	Time		

Date:

Signature

Recommendations (If Institute vehicle is recommended, reasons there of)

Signature

Tour : Approved/Not Approved

Mode of Transport: Institute Vehicle/Public transport

**Director**