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FORM TO BE FILLED IN FOR RELEASING OF SEATS IN PAWAN HANS HELICOPTER

Note : Valid for one day only

1. Destination : RESEARCH ASSOCIATE
2. Date of Journey : 01.06.2013
3. Purpose of Journey : Contemporary Survey of Shompen Tribes
4. Official/Private : official
5. Nationality : Indian

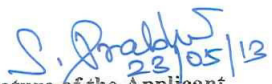
GOVT. SERVANTS:

Sl No.	Name of the Applicant	Designation	Department	Basic Pay	Sex	Age
1	Dr. S. PRABHU	RA	BSI, ANRC		M	39

OTHERS

Sl No.	Name of the Applicant	Organization/NGOs	Purpose	Sex	Age

6. Contact Address : The Head of office, Botanical Survey of India, Port Blair
7. Permanent Address : Type III, e.s. BSI, Residential colony, Shadipur.
- Contact No(Ph. No.) : 03192-233224
- (Mobile No.) : 9531838089


 Signature of the Applicant
 Name: S. PRABHU.

NOTE

(Only for Tourist and Pvt. Party)

Copy of Tribal Pass to be attached in case of visit to the Southern Group of Islands
viz. Car Nicobar, Teressa, Katchal and Kamorta.