STATE INSTITUTE OF TECHNICAL TEACHERS TRAINING & RESEARCH, KALAMASSERY

Course Title: **Course Code:**

Head Quarters:	Name in Capital letters:	Basic Pay:	Allowance:
	Designation:	A/C No. & IFSC Code:	
	Address:	Bank/Branch :	

Departure			**Arrival**										
Station	**Date**	**Time**	**Station**	**Date**	**Time**	**Distance (KM)**	**Mode of Journey Rail/Road**	**Fare (Rs)**	**Incidental Expenses (Rs)**	**DA for halt(Rs)**	**Total Amount (Rs)**	**Purpose of Journey**	**Remarks**
1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**
TOTAL													

Certified that I have performed journey from …… to ……. by …… .. and
From …… to …….. by ……..
Certified that I will perform journey from …… to ……. by ……... and
From …… to …….. by ……

Received from the Joint Director, State Institute of Technical Teachers Training & Research, Kalamassery An amount of ₹……/- (Rupees……..…… …… only) being My TA & DA for attending the Faculty Development Programme mentioned above.

Signature of the Officer:

Signature:

Signature of Joint Director: