भारतीय आयुर्विज्ञान अनुसंधान परिषद
INDIAN COUNCIL OF MEDICAL RESEARCH

वी. रामलिंगस्वामी भवन, अन्सारी नगर, पोस्ट बॉक्स 4911, नई दिल्ली - 110 029
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No.16/57/2015-Admn.II   Dated : 05.05.2015

To

    The Directors/Directors-in-Charge
    of all permanent Institutes/Centres of ICMR

Sub :   Compulsory Submission of Details of Private (Foreign) Visit in Proforma—
         regarding.

Sir/Madam,

    As instructed by Sr.DDG(A), all the officers of the Institutes/Centres/ICMR
Hqrs. are hereby informed that before proceeding on private (foreign) visit, the
details of the visit may be furnished in the proforma (copy enclosed) to facilitate
the Competent Authority to accord its approval for the visit.

    This may be scrupulously followed henceforth.

                                                        Yours faithfully,

                                                        (Bharat Bhushan)
                                                        Admn. Officer
                                                        For Director-General

Encl :   As above.

Copy to :-

    1.   PS to DG/Sr.DDG(A)/Sr.F.A.
    2.   All Divisional Heads
    3.   ADG(A)-I, II
    4.   Sr. A.O. (Admn.I) ICMR Hqrs. Office
    5.   A.O. Personnel Section
    6.   All Admn. Officers/All Accounts Officers
    7.   Head, BIC – with the request to place above circular on ICMR website

PROFORMA FOR PRIVATE (FOREIGN) VISIT

NAME & DESIGNATION OF THE OFFICER	
PLACE / S PROPOSED TO BE VISITED	
WHETHER THE VISIT IS BEING UNDERTAKEN ALONGWITH THE FAMILY MEMBERS? IF SO, DETAILS TO BE FURNISHED	
DURATION OF THE VISIT	
KIND OF LEAVE	
DECLARATION STATING THAT EXTENSION OF LEAVE WOULD NOT BE SOUGHT FOR ANY PERIOD BEYONG WHICH LEAVE IS SANCTIONED	
PURPOSE OF THE VISIT	
APPROXIMATE EXPENDITURE FOR THE VISIT	
SOURCES OF FUNDING FOR THE PURPOSE:- I) PERSONAL SAVINGS (Rs...................) II) FINANCIAL ASSISTANCE FROM RELATIVES & FRIENDS (Rs.....................) *(IN CASE RELATIVES / FRIENDS MEETING THE EXPENDITURE, DETAILS OF THIER OFFER LETTER / INVITATION AND THEIR BACKGROUND / RESOURCES BE SPECIFIED)*	
WHETHER ANY FOREIGN HOSPITALITY IS BEING ACCEPTED? IF SO, DETIALS SHOULD BE GIVEN	

DATE: **(SIGNATURE)**