

Outstation Event Participation Form

F/N: SRMIST_FET_TRC-TC-A4.4-_____

Date: DD-MM-YYYY

From

Student Name, Registration Number

Department, School Name

SRM Institute of Science and Technology Tiruchirappalli

To

The Dean FET,

SRM Institute of Science and Technology, Tiruchirappalli.

Subject: Permission to Participate in Outstation Event & Participation Form

Dear Sir/Madam,

I, _____ (Team Leader), on behalf of myself and my team of _____ members, have been selected/shortlisted to represent our institute at the following outstation event. Kindly grant us permission to attend and participate as detailed below. Our participation is endorsed by the Department of _____ under my leadership.

Enclosed are the event particulars and requisite parent/guardian undertakings for each team member. Please consider this letter as an Official Duty (OD) request for the aforementioned dates.

Event Details:

Event Name	: (Mention the overall event name – specific event name if applicable)
Organised By	: (Institute name)
Event Location	: (Event Location, City and State)
Start and End Date	: (Start Date – End Date) (DD-MM-YYY) / (Number of Days)

Event poster and selection / confirmation letter / mail has been attached.

Participant Details:

S. No.	Name	Reg. No.	Department	Gender	Parent Undertaking Attached

Attachments:

	Event Poster / Banner		Acknowledgement / Selection Letter
	Payment Receipt (if any)		Travel ticket Booking Proof (if any)
	Parents Under-taking Form for ____ members		Other

Instructions:

1. Fill all fields clearly in BLOCK LETTERS.
2. Attach scanned copies / photocopies of all documents with this form.
3. Submit to the Department Office at least 7 working days before departure.
4. Incomplete forms will not be processed.

Project
Faculty
Mentor

Faculty
Mentor

Head of
Department

Department's
Outreach
Faculty Incharge

Manager
Innovation and
Incubation

Dean FET

Parent/Guardian Undertaking Form

From

Parent/Guardian Name,

F/O | M/O - Student Name, Registration Number

To

The Dean FET,

SRM Institute of Science and Technology, Tiruchirappalli.

Subject: Permission to Participate in Outstation Event & Participation Form

I, _____ (Parent/Guardian of _____,
Reg. No. _____), hereby grant permission for my ward to
participate in the above-mentioned event from _____ to _____ (including
travel days). I accept full responsibility for his/her safety, travel, accommodation, and conduct
throughout this period. The mode of transport for my ward will be _____. I
understand and agree that the Institute shall bear no responsibility for my ward during the
aforementioned period, and I will take full responsibility for my ward during these mentioned
periods.

Yours sincerely,

Parent/Guardian Signature

Contact No:

Date: