



NIGERIAN CONTENT DEVELOPMENT AND MONITORING BOARD

AUTHORISATION TO TRAVEL FORM

I hereby confirm that _____ is duly
authorized to travel on local tour from _____ to
_____ for a period of _____ nights

Purpose of travel

1. _____
2. _____

Division/Directorate:	Unit:
Designation/Position:	
Budget Funding Source:	

Approving Department/Division/Directorate: _____

(This is the staff's Department/Division/Directorate)

Approved by: _____

(Dept/Div/Directorate Requesting for Staff)

Approved on behalf: _____

(Necessary only when the Approving Staff for the requester is not present)

N/B: ONLY ONE APPROVAL IS REQUIRED.