

भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

APPLICATION FOR AVAILING EXTENDED TRANSPORT FACILITY (TO BE SUBMITTED BY THE INSTITUTE EMPLOYEES & R&D STAFF)

I, Dr./Mr./Ms	Designation
DOJ Dept./Section/	Centre do hereby declare that, I am availing
the transport facilities of the Ins	titute to attend to my duties at the Institute with effect from;
Route No	
My present residential address	is
I also understand that I shall ha	ve to make a fresh declaration immediately once the above status changes.
	Signature of the Employee
Date:	Emp_No
	<u>p</u>
	(FOR OFFICIAL USE)
Dr./Mr./Ms	Designation
Dept./Section/Centre	is using extended transport facility to attend office
w.e.f as s	uch, an amount of Rs. 400/- may be deducted from his salary as bus fee from
the month of	
For approval please.	

ASST. REGISTRAR (ESTB.)



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

APPLICATION FOR AVAILING EXTENDED TRANSPORT FACILITY

(TO BE SUBMITTED BY OTHER USERS)

I, Dr./Mr./Ms							Designation							
	Dept./S	ection	/Centre					d	o he	reby	declare th	at, I ar	m availir	ng the
transport	facilities	of t	the Institute	to	attend	to	my	duties	at	the	Institute	with	effect	from
		,Route	No											
My presei	nt residenti	al add	lress is											
													•	
													•	
I also und	erstand tha	at I sha	all have to ma	ake a	fresh de	eclar	ation	immedia	tely	once	the above	status	change	S.
											Signatu	re of t	he App	licant
Date:											Emp_N			
Dato			_								Emp_i	o		
					(For o	FFIC	IAL U	SE)						
Dr./Mr./M	S							Desig	natio	on				
Dept./Sec	tion/Centre	э					is	using ex	xten	ded tr	ansport fa	cility to	attend	office
w.e.f			as such, an	amo	unt of R	s. 40	00/- m	ay be de	educ	ted fr	om his sa	lary as	bus fee	from
the month	of													
For appro	val please													

ASST. REGISTRAR (ESTB.)



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

APPLICATION FOR AVAILING SHUTTLE TRIP TRANSPORT FACILITY

(TO BE SUBMITTED BY THE INSTITUTE EMPLOYEES & OTHERS)

, Dr./Mr./Ms		Designation	
DOJ Dep	t./Section/Centre	do hereby	declare that, I am availing
the transport facilities	of the Institute to attend to my du	uties at the Institute with effect	from;
Route No			
My present residentia	l address is		
also understand that	I shall have to make a fresh decl	aration immediately once the	above status changes.
		_ Si	gnature of the Employee
Date:			Emp_No
<u></u>		_	
	(For off	FICIAL USE)	
Dr./Mr./Ms		Designation	
Dept./Section/Centre.		is using extended trans	port facility to attend office
w.e.f	as such, an amount of Rs.	300/- may be deducted from	his salary as bus fee from
the month of			
For approval please.			
- Approximation			

ASST. REGISTRAR (ESTB.)