

AIRWAYS COURIER (I) PVT. LTD.

TRAVEL REQUISITION FORM

Requisition No.

Date:

To: Administration Department

As required, I am to visit outstation and I request you to make travel arrangements. The details are provided below:

SI.No.	NAME	Dept.	AGE	DATE	FROM	TO

Purpose of Visit: _____

Mode of Journey (Please tick)	<input type="checkbox"/> Train	<input type="checkbox"/> Bus	<input type="checkbox"/> Air
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**Signature of
Employee**

**Recommended
by**

**Approved by
DIRECTOR/HOD**

Note: This requisition has to be submitted atleast one week in advance to organize ticket Cancellation charges for the tickets booked without proper plan will be borne by the employee