

Date: _____

Outward No.: _____

The Charutar Vidya Mandal University, Vallabh Vidyanagar
Approval Form for Educational Tours / Picnic / Field Trips

1	Name of the Institute:	Institute of Science & Technology for Advanced Studies & Research					
2	Type of Tour :	Educational	Picnic	Field Trip	Excursion	Camp	{Tick the relevant Tour (s)}
3	Coordinators and accompanying Teachers:	1. 2. 3.					
4	Place of Tour:						
5	No. of Days:	From:	To:		Day(s)		
6	Time Period:	Expected time of Departure	_____		Expected time of Arrival	_____	(Specify a.m./p.m.)
7	Classes (specify):	F.Y.	S.Y.	T.Y.	Other		{Tick the relevant class(s)}
8	Total No. of Students:	Boys		Girls		Total	
9	Transport:	School Bus	Other School's Bus(s)		Private Bus		{Tick the relevant item}
10	No. of Buses needed: (32, 42 ,62-Seater etc.)	1	2	3	4	5	{Tick the relevant No.}
11	Total Charges per Student (includes transport, lunch, snacks and entry fee, etc)	Rs. _____					(Specify if any other)
12	Permission for the Bus:	Sought			To be sought		(Tick relevant item)
13	Whether Undertaking by Parent taken?	YES / NO					
14	Whether RTO's necessary permission obtained?	YES / NO					
15	Whether Insurance taken?	YES / NO					

Dr. M.M. Raj,
Principal, ISTAR

Registrar, CVMU

Date:

NB : Declaration by Principal should be properly filled up and to attached with this Approval Form.

Declaration by Principal

I, the undersigned Dr. Mahendrasinh Raj Principal of ISTAR do hereby declare and undertake as under;

That whenever any Educational Tour / Picnic / Field Trips of the students is organised by the monetary contribution of the students and / or CVM (partly or fully) the accounts of the same shall be maintained properly and shall be presented before the CVM as well the same shall be displayed on the Notice Board of the Institute, within a period of 7 days after the completion of such Educational Tour / Picnic / Field Trips. The balance amount, if any, will be refunded to students who contributed money or will be returned to CVM in case the CVM would have provided contribution (partly or fully) to such educational tour / picnic / field trips.

Date:

Place:

Dr. M. M. Raj
Principal, ISTAR

Undertaking by Parent

I, the undersigned Mr./Mrs. _____ hereby consent to send my son / daughter _____ studying in _____, _____ institute on Educational Tour / Picnic / Field Trips from Vallabh Vidyanagar / New Vallabh Vidyanagar to _____ for a period of _____ days.

That I have instructed my son/daughter _____ to maintain good conduct and discipline during the aforesaid tour and to obey the general instructions provided by the concerned authorities. In case of any unlawful conduct on the part of my son / daughter, he /she will personally be held responsible.

Further that, I do hereby undertake all responsibilities in respect of any eventual occurring due to medical ailments, accidents, injury etc. and/or delay/ loss/ damage to belongings of my son/ daughter. The Institute as well as Charutar Vidya Mandal authorities shall not be held liable for any misconduct or unlawful acts of whatsoever nature during said Tour by my son / daughter.

The particulars of my son / daughter furnished hereunder are correct to the best my knowledge. This undertaking is given by me without any pressure and prejudice.

Date:

Place:

Signature of Parent

Particulars of my Son / Daughter

1. Contact Number :
2. Address :

3. Blood Group :
4. Special Remarks about
 - a) Health :
 - b) Habits :
 - c) Allergic :