

UNIVERSITY OF VETERINARY AND ANIMAL SCIENCES, LAHORE Transport Section

Phone # 042-99212313 Exchange Ph.# 042-99211449, 042-9211374 Ext. 172

PROFORMA FOR ARRANGEMENTS OF TOURS FOR STUDENTS

Nature of Tour:			
Class:	No. of Students:	Required Vehicle:	
Name of C.R:	Contact:	Signature of C.R:	
Name of Class Advisor:	Contact:	Sign/stamp:	
Signature of DSA:	Signature of Senior Tutor:		
Signature of Estate Managem	ent Officer:	Officer: Guard Available:	
Place of Visit:		Local / Out station:	
Date from	to	time from:	to
Expenses for fuel will paid by	the students / University		
Vehicle Available:		Signature of Transport Cell:	
		<u> </u>	nature & Stamp of P.O Transport Section
	DECLAR	ATION BY USER	
I, Dr. / Mr solemnly declare that I will be responsible for the discipline of the class / students in the function / Tour and they will abide all the rules and regulations of the University. In case of any indiscipline / loss University has full right for disciplinary action against me.			
			User Signature
Recommendations/Signat of Dean	ure Stamp		
Approval / Signature of th	e Vice Chancellor		
	FOR USE OF MOTOR PO	OOL / TRANSPORT SEC	TION ONLY
Issued Vehicle:	Driver	Name:	Dated &Time:
Departure Meter:	Arrival N	Neter:	Mileage Covered:

SIGNATURE (TRANSPORT OFFICER)