GOVERNMENT COLLEGE,

Phone -

Email:

DEPARTMENT OF

PROPOSAL FOR THE STUDY TOUR PROGRAMME (2016-2017)

1. Name of the College	:	
2. Department of study	:	-
3.Subject of study	:	
4. Academic year	:	
5. Number of students participating	:	
(List enclosed with name and age of students)		
6.Proposed Date of commencement of tour	1	
7.Date of completion of tour	1	
8.Total number of Days		
9. Whether as per syllabus	:	
10.Proposed place of outside kerala	1	
11.Total Number of Halt	1	
12.Programme Chart	:	
13.Mode of Conveyance		
14.Name and Designation of staff Accompanyi students	ing :	
15.Lady escort with designation	:	
	CERTIFICATE	
Certified that the study tour organised by the department is purely academic in nature, prescribed syllabus and the tour report is subjected to evaluation.		
signature, Name and Designation of HOD with Date :		
Recommendation of the Principal	:	
Place: Date:		