

राजस्थान सरकार

निदेशालय यूनानी चिकित्सा विभाग राजस्थान जयपुर

आयुष भवन, सेक्टर 26, प्रताप नगर, जयपुर-302033 फोन नं. 0141- 2796625मेल-Rajunani444@yahoo.in
क्रमांक:- प्रति1./परिपत्र/विदेश-यात्रा/2019-20/ दिनांक :-

परिपत्र

संयुक्त शासन सचिव, आयुर्वेद एवं भारतीय चिकित्सा विभाग, राजस्थान के विभागीय समसंख्यक पत्र दिनांक 26.06.2018 एवं पत्र क्रमांक प.10(64)आयु./2017 जयपुर, दिनांक 09.05.2019 की अनुपालना में भविष्य में कोई भी अधिकारी/कर्मचारी राज्य सरकार की सक्षम स्वीकृति, अनुमति/अनापत्ति प्रमाण पत्र एवं अवकाश स्वीकृति के बिना उमराह (धार्मिक यात्रा) हेतु मक्का मदीना जाने के लिये विदेश यात्रा पर प्रस्थान नहीं करेगा।

भविष्य में विदेश यात्रा पर जाने से पूर्व संलग्न प्रफोर्मा में ही आवेदन करने पर स्वीकृति प्रदान की जावेगी।

क्रमांक:- प्रति1./परिपत्र/विदेश-यात्रा/2019-20/3421-23 दिनांक :- 22/05/19
प्रतिलिपि :-

1. संयुक्त शासन सचिव, आयुर्वेद एवं भारतीय चिकित्सा विभाग, जयपुर।
2. समस्त यूनानी चिकित्साधिकारी, राजकीय यूनानी औषधालय/चिकित्सालय/पीएचसी/सीएचसी/जिला चिकित्सालय।
3. नोडल अधिकारी, विभागीय वेबसाईट को देकर लेख है कि उक्त परिपत्र को विभागीय वेबसाईट पर अपलोड करे।
4. रक्षित पत्रावली।

निदेशक
दृष्टा
निदेशक

Government of Rajasthan
Ayurved and Indian Medicine Department

Name of College:

Application for permission to visit/attend workshop/seminar Conference abroad

Name	
Designation	
Details of the event to be attended	
Capacity in which invited to attend (Personal/Conference/Paper presentation/As faculty)	
Country	
Duration of proposed visit (in Days)	
How will the event benefit the participant and the hospital in which he/she serving	
Estimated expenses on proposed visit/attending the proposed event and sources of funding	
Sponsored by	
Whether spouse will accompany THE APPLICATION? (Yes/No)	

Details of foreign visit in last years

S.No.	Year	Country	Duration (In Days)
01			
02			
03			
04			

Date:

Signature.....

Name of Applicant.....

Designation and Department.....

Office Use Only

01.	Whether MCI Inspection is due or Not (For relevant Course)	Yes/No
02.	Self declaration on plain paper submitted in hardcopy	Yes/No
03.	05 years details submitted in hardcopy	Yes/No
04.	Last visit's paper submitted	Yes/No
05.	Departmental Enquiry is pending against him/her under the section 16/17CC	Yes/No

Prof & Head

Principal & Controller

S.No.	Details	To be filled up
1	Name of the Officer	
2	Service and year of Recruitment	
3	Present Posting	
4	Whether any DE Pending?	
5	Whether any FIR/complaint pending?	
6	Whether a criminal case is pending in a court of Law in which challan has been put up?	
7	Period of visit Abroad (from _____ to _____)	
8	Names of Foreign Countries to be visited	
9	Estimated expenditure on visit (Travel, Board/Loading, Visa, Misc. etc)	
10	Source of funds	
11	Reasons for the visit	

I _____ hereby declare that the contents given above are true to the best of my knowledge and belief and nothing has been concealed therein.

Place:

(Signature of Applicant)

Application for permission to visit/attend workshop/seminar Conference abroad

1. Name
2. Designation & Place of Postin
3. Details of the event to be attended
4. Capacity in which invited to attend
5. Country
6. Duration of proposed visit
7. How will the event benefit the participant and the hospital in which he/she is serving
8. Details of previous foreign visits/events abroad in which the applicant participated along with the duration
9. Total expenses on the events attended earlier and source form which the expenses were met.
10. If the organizers are bearing expenses, application for clearance under FERA be enclosed
11. Estimated expenses on proposed visit/attending the proposed event and sources of funding.
12. Whether spouse will accompany THE APPLICANT?
13. No. of papers published by the applicant in indexed journals.

Dated:

Signature _____

Name of Applicant _____

Recommendation

1. The Participation of the applicant in the above event is recommended because it will be beneficial to the hospital & applicant in the following manner:

2. This is an accordance with the terms and condition mentioned in Govt's Policy for fellowship and training abroad and inside the country.
3. Participation not recommended on the following grounds:
 - i)
 - ii)

Prof & Head

Principal & Controller