

CENTRAL SILK TECHNOLOGICAL RESEARCH INSTITUTE
CENTRAL SILK BOARD
BTM LAYOUT BANGALORE

INDENT FOR MARKING TOUR/OOD IN THE ATTENDANCE REGISTER

NAME _____

DESIGNATION: _____

SECTION _____

PLACE/PERIOD OF TOUR/OOD _____
FORENOON/AFTERNOON :

REASON _____

PALACE: BANGALORE
DATE:

SIGNATURE OF THE OFFICER/OFFICIAL
NAME:
DESIGNATION:

SIGNATURE OF THE SECTION INCHARGE: