

**APPLICATION FOR AN ADVANCE PAYMENT / REIMBURSEMENT OF AIR  
FARE ON SABBATICAL LEAVE / STUDY LEAVE**

1. Name: .....
2. Designation: .....
3. Department: .....
4. Duration of Leave: .....
5. Whether entitled to Full Passage,  
if not, eligible:  
.....
6. Amount payable:  
.....  
(Self / Spouse / Both)
7. The amount payable:  
.....  
(If reimbursement, please attach counterfoils)  
I herewith attach a letter (Photocopy) from the Awarding Agency for your reference.
8. I hereby declare that neither I nor my wife / husband received a travel grant from any  
other source and that the information supplied above is true and correct. I also hereby  
undertake to produce the tickets before I leave the Island.
9. I / We hereby agree to surrender the counterfoil of the said air ticket / tickets as soon  
as I / We return to the Island.

.....	.....
Date	Signature of Applicant
Vice-Chancellor	
Payment recommended and forwarded please	
.....	.....
Date	Head of the Department
.....	.....
Date	Dean of the Faculty
	Cont.....p/2

**FOR OFFICE USE ONLY**

**ACADEMIC ESTABLISHMENTS:**

- 10. The above named Professor / Senior Lecturer / Lecturer had been granted Full pay / No pay leave.
- 11. The above named Professor / Senior Lecturer / Lecturer and his / her wife / husband is /are entitled to Full / Half / ..... Passage.
- 12. The amount given at (6) above is therefore recommended as he / she is not getting a travel grant. He / She has used / not used any railway warrants.

Date: .....

.....  
Deputy Registrar / Senior Assistant Registrar /  
Assistant Registrar  
Academic Establishments

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**ACCOUNTS BRANCH**

- 13. The air fare from Colombo to ..... / from ..... to Colombo is Rs: .....
- 14. Therefore, the amount payable per person is Rs.....
- 15. Total amount payable is Rs: .....

Prepared by: .....  
Checked by: .....

Vice-Chancellor / Registrar / Bursar / Assistant Bursar

For approval to pay the amount given in (15) above please.

.....  
Signature

- 16. Recommendation of the Registrar / Bursar / Assistant Bursar

.....  
Signature

- 17. Approval of the Vice-Chancellor to pay the amount given in (15) above.

.....  
Date

.....  
Signature