PROFORMA FOR SEEKING RELAXATION FOR TRAVEL BY OTHER AIRLINES

1. Name with designation :

2. E-mail address :

3. Mobile/telephone/fax no.

4. Name of Division in DeitY or Autonomous body

5. Purpose of official duty

6. Sector for which exemption from

Travel by Air India

Sector*	Date	From	То	Flight No. Dep. Arr.
Sector 1				
Sector 2				
Sector 3				

7. Detailed reason(s) for not utilizing
Air India services

8. Airfare of Flight proposed other than Air India

Recommendation of GC/Head of Office

Signature (Name & Designation)