

TRAVEL ALLOWANCE FORM

Hindustan Petroleum Corporation Limited
REIMBURSEMENT FOR TRAVEL EXPENSES FOR CANDIDATES
(For Scheduled Caste / Scheduled Tribe / Persons with Disability candidates)

Name & Mailing Address:	
	HPCL App No :
	Category: SC / ST / PwBD
	Training Position: Apprentice
Pin Code:	Venue :
Contact Tel. No:	Centre/City

JOURNEY DETAILS

Journey	Date (s)	Mode of travel	Class of Travel	Ticket/Receipt No	Travel Fare (Rs.)
From :		Rail/Bus			
To :					
From :		Rail/Bus			
To :					
Total Rupees					

BANK DETAILS

Name of Bank		Name of A/c Holder	
Bank Account No.		Branch Code	
Bank's IFSC Code (12 Digit)			

- a) **Attach Original / Photocopy of Rail / Bus Tickets / Receipt towards proof of journey.**
- b) **Attach copy of Caste / PwBD Certificate (as applicable).**

I hereby affirm that the information furnished by me in this form is true and any false information will render me liable for non-payment of travel expenses.

Venue:

Date:

Signature of Candidate
