GOA SHIPYARD LIMITED
VASCO-DA-GAMA, GOA

TA CLAIM FORM

Post : _____Advt. No. : _____

To,
Chief General Manager (HR&A)
Goa Shipyard Limited,
VASCO-DA-GAMA,
GOA – 403 802.

Date : _____

Category:_____

Dear Sir,

Sub: Reimbursement of Travelling Expenses.

Pursuant to your Job Registration No. _____dated _____ for the post of _____,
I have attended the written test / interview today.

I have travelled from _____ to Vasco-da-Gama, Goa. One way A/C II tier/ Sleeper Class Rail Fare/ Bus Fare/ Air Economy Fare is Rs. _____.

I may, therefore, be paid to and fro A/C II tier/ Sleeper Class Rail Fare/ Bus Fare/ Air Economy Fare.

HR department will not be responsible if I have traveled by any longer route.

Thanking you,

Yours Faithfully

Signature: _____

Name: _____

Contact No. : _____

Place : Vasco-da-Gama, Goa

Encl : 1) Original Ticket * of : Bus ☐ Train ☐ Flight ☐ Other ☐ _____(Specify)
2) Copy of Caste Certificate * : SC ☐ ST ☐
3) Bank details for payment through ECS (refer page no. 02)

- INSTUCTIONS :
- *Kindly fill the form in BLOCK / CAPITAL LETTERS.
- *Payment of TA claim shall be with held in case original ticket & copy of caste certificate (if applicable) are not attached.

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BANK DETAILS FOR PAYMENT THROUGH ECS

- All information in Capital letters.

1.	Beneficiary Name * (Name of the Candidate)	
2.	Bank Name & Address *	
3.	Type of Account (Please tick [√] any one)	Saving Account Current Account
4.	Bank Account No.	
5.	Branch IFSC Code	
6.	Email address of Candidate	
7.	9 digits MICR Code Number of Branch	

The above information, furnish by me is true and to the best of my knowledge.

_____

Signature of the candidate

Contact No.: _____

Date : _____