



TRAVEL PLAN FORM

XLVI INDIAN SOCIAL SCIENCE CONGRESS

(January 27-31, 2023, Bharathidasan University, Tiruchirappalli 620024, T.N.)

TRAVEL PLAN TO BE MAILED TO THE ORGANISING SECRETARY BEFORE JANUARY 15, 2023

My name and address is as given below:

<Name> _____

<Designation> _____

<Instt. _____

abbreviatiion> _____

<address line 1> _____

<address line 2> _____

<address line 3> _____

<Place> _____ <pin code> _____ <state> _____

Phone(O): _____ Phone (R): _____

Fax: _____ e-mail: _____

Gender: _____

I am unaccompanied
full name in CAPITALS

I am accompanied as below
age gender

m f
 m f
 m f

number of accompanying persons: _____

Details of Travel

Arrival		Departure		Place from	Train	Plane	Bus
Date	Time	Date	Time				

full name in CAPITALS

signature & date

instt. & place

Addressed to:

Dr. S. SENTHILNATHAN

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