

TRINITY COLLEGE OF ARCHITECTURE, PUNE

Site Visit Permission Form

1. Student Details

Name of the Student: _____

Class / Year: _____

Roll Number: _____

Contact Number: _____

Parent/Guardian Contact Number: _____

2. Site Visit Details

Site/Location to be Visited: _____

Purpose of Visit (e.g., Case Study, Documentation, Survey, etc.):

Date of Visit: ____ / ____ / 20____

Time of Visit: From _____ to _____

Mode of Travel: _____

Faculty In-charge / Guide (if any): _____

3. Declaration by Student

I hereby request permission to visit the site mentioned above for academic purposes. I take full responsibility for my conduct and safety during the visit and agree to report back with any required documentation or report.

Student Signature: _____

Date: ____ / ____ / 20____

4. Faculty Approval

Remarks (if any):

Class Coordinator Name: _____

Signature: _____

Date: ____ / ____ / 20____