



NITOL NILOY GROUP

**INTERNET ALLOWANCE FORM**

Applicant Information:

Name:	
Designation:	Department:
ID:	Date of joining:
Place of Posting:	

Applicant Signature & Date: \_\_\_\_\_

**Official Use**

Grade and Allowance Recommendation by Dept. Head/CBO with Signature: \_\_\_\_\_

\_\_\_\_\_

IT Department: \_\_\_\_\_

Accounts/ Finance Department: \_\_\_\_\_

HRD (For Record Keeping): \_\_\_\_\_

Management's Decision (As Applicable): \_\_\_\_\_