

## **Application for Requesting Permission to Visit the Department of Meteorology**

1. Name of the organization: .....
2. Postal address of the organization: .....  
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3. Grade of the students/age group: .....
4. Medium of the lecture: .....
5. Number of participants (maximum capacity is 210): .....
6. Expected date and time: .....
7. Telephone number: .....
8. Email address: .....
9. The usual lecture is conducted on the topic “Task and the Responsibilities of the Department of Meteorology and Meteorological Instruments”. Please mention if any special topics are needed. (Ex: Weather forecasting process, climate change ...):  
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Signature and the official seal of the head of the organization