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| 1. Name of the Student (Full time students only) |  | 4. Nature of Event : |
| * 2. Roll No.
 |  |
|  3.Department : |  | 5. Name of the Event |
| 6. Place (S) of the event (Visit) Conference / Training Course / Workshop Seminar / Symposium / Others (Complete Address): |
| 7. Duration required for the event with date (S) :From\_\_\_\_\_\_\_\_\_\_\_\_\_\_To \_\_\_\_\_\_\_\_\_\_\_\_\_\_No. Of days:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. Organizer of the event: |
| 9. Relevance of the visit / training: |
| 10. Clear objective and outcome of the visit: |
| 11. Attach (i) brief CV / biography  |
| 12. Attach certificate from HoD regarding relevance of the event for the applicant and by stating that the event will benefit for the applicant |
| 13. Date and time of departure from the Institute: |
| 14. Date and time of arrival from the Institute: |
| 15. Whether going to present research paper : Yes/No |
| 16. Title of Paper |
| 17. Attach the accepted paper, acceptance letter, NOC from co-authors: |
| 18. Total cost involved Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Rupees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Only)Please give cost details (Attach separate sheet , if necessary)Registration Fee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Others, If any (Special) |
| 19. Details of the events already attended during the current calendar year / till date  |
|  Title of event | Duration of the visit |
| 1 |   |
| 2 |  |

|  |  |  |
| --- | --- | --- |
| 20. Signature of the student | 21. Signature of the Supervisor | 22. Recommended/ Not recommended by HoD Signature (with seal) of the HoD: |

**For office use only**

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| Clerk TEQIP (whether all the necessary documents are attached)  | Nodal Officer (Academic) |
| Nodal Officer (Finance)(for budgetary provisions) | TEQIP Coordinator |
| May approve please and may give permission for issuing of office order please:**Director**  |