APPLICATION FOR "LEAVE ON DUTY" AND "FINANCIAL SUPPORT" TO ATTEND CONFERENCE ABROAD

1. Name & E. Code No.   :

2. Designation   :

3. Place of Assignment(Dept./Divn./Unit)   :

4. Number of completed years of service in the
   Institute   :

5. Date (s) of the Programme   :From…………….To…………….

6. No. of days of leave & Period of leave required   :From…………….To…………….

7. What is the nature of the foreign conference ?   :
   (World congress of international societies/
   meeting of a regional organization /annual meeting
   of national society of a foreign country/
   workshop/symposia)

8. Name of the organizers and place where
   the conference / seminar etc. is to be held   :

9. Title of the paper being presented   :

10. Has the Director approved the abstact of the
    paper being presented ? If so attach the original   :
    copy with Director's approval.

11. Is the presentation an oral delivery of a free paper
    or a poster display ? (If the presentation is an
    invited talk, please enclose the letter of invitation.)   :

12. Has the paper ben accepted (enclose a copy   :
    of the letter of acceptance)

13. Are you the presenting author?

14. Was the work done in the Institute
    (enclose endorsement from the   :
    Head of Department).

15. Has the paper been presented in any other
    conference previously by any other faculty member ? :

16.   What is the expected number of the participants?   :

17.   Do you consider that your presentation would bring
        laurels to the Institute(state reasons for your
        expectations)

18.   Have you previously obtained financial   support   :
        for any conference abroad ? If so when
        (specify the date)

19.   Have you obtained any partial financial
        support(waiver of registration fee / local hospitality/   :
        partial travel support)

20.   Amount of financial support required
        (Reg. Fee travel/ fare by shortest route/daily   :
        allowance as per Institute rules)

21.   Have all the co- authors of the paper affixed their   :
        Signature on the abstract ?

Date: Signature of the applicant
_____

Remarks of HOD (including the details of alternate work arrangements made)

                                                HOD
_____
Remarks of the recommending committee

_____
Remarks of the P&A.Division

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ORDERS OF THE SANCTIONING AUTHORITY

Sanctioned / Not sanctioned

DIRECTOR