



CENTRAL UNIVERSITY OF SOUTH BIHAR

(Established under Central Universities Act, 2009)

Application for getting financial assistance to attend National/ International Conferences/Symposia under the 'Travel Grants' scheme.

A. Details about the applicant

1.	Name	
2.	Date of Birth (Age) [DD/MM/YYYY]	
3.	Sex (Male/Female)	
4.	Category SC/ST/OBC (excluding creamy layer)/General	
5.	Designation/Basic Pay/Nature of Appointment (Whether Permanent/ Contract)	
6.	Name of School/Centre/Department Tel./Mob.: Email:	
7.	Main Subject and Field of Specialization	

B. CONFERENCE DETAILS

8.	Name/title of the conference to be attended	
9.	Name of the organizers with complete address	
10.	Name of the place where the conference will be held	
11.	Duration of the conference (dates, month & year) (Please attach the Conference Brochure)	

12.	<p>Nature of participation of the applicant (submit documentary evidence)</p> <p>(a) Presiding/chairing a Session and also presenting a paper (b) Delivering a plenary lecture/invited talk (c) Presenting a paper (d) Poster presentation</p> <p><i>(please attach abstract and full paper to be presented in the conference)</i></p>	
13.	<p>Whether the paper has been accepted for presentation?</p> <p><i>(Attach acceptance letter from the organizer)</i></p>	
14.	<p>If the paper is co-authored write names of all authors with institutional affiliation in the order as it appears on the paper.</p>	
15.	<p>Name of the author presenting the paper:</p> <p><i>(Note: Only the author presenting paper is entitled for grant with No Objection by other authors.)</i></p>	
16.	<p>(a) Indicate the complete travel plan from the proposed date and time of departure from the University to the conference and back.</p>	
	<p>(b) Nature of leave applied for attending the Conference/Seminar</p>	
	<p>(c) Arrangement of classes and other duty during absence.</p>	

17.	<p>Indicate the amount to be paid to the organizers as registration fee (copy of the Registration Form to be enclosed)</p> <p>Assistance required from the University</p> <p>(a) Travel within India to reach the nearest Airport/ Railway Station.</p> <p>(b) Airfare/Train fare (both ways)</p> <p>(Reimbursement/Adjustment to be made on shortest route basis.)</p> <p>(c) Registration fee</p> <p>(d) Per-diem required (indicate the number of days and the rate)</p> <p>Total (in Rs.)</p>			
18.	<p>Has the applicant approached the organizers/any other agency to:</p> <p>(a) Waive registration fee?</p> <p>(b) Support air travel?</p> <p>(c) Get the maintenance allowance?</p> <p>(d) Support boarding and lodging?</p> <p>(e) Any other? (specify)</p>			
19.	<p>If 'YES' to any one of the above items, indicate the latest position and the amount likely to be made available (attach documentary evidence).</p>			
20.	<p>Has the applicant availed the financial assistance from the University for attending seminar/conference/symposium etc. in the last 2/3 years prior to the date of the present conference?</p> <p>(a) If 'YES' give the details in the following table:</p>			
	Name of the Conference attended (with period of leave availed)	Place and dates of the Conference	Financial Assistance availed (in Rs.)	University sanction letter no. with date

21.	Any other information the applicant would like to give in support of the case.	
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I certify that :-

- (a) The details given above are correct.
- (b) If the information supplied is found to be incorrect at a later date, I shall reimburse the entire amount to the University.
- (c) The amount received will be used for the purpose for which it is requested.
- (d) In case financial assistance is received from the organizers or any other agency I shall pay back the amount granted by the University.
- (e) I shall abide by the decision of the University.

Place:

Date:

(Signature of the applicant)
Designation

RECOMMENDATIONS OF THE HEAD OF DEPARTMENT

I recommend full/partial support, as the guidelines for travel support are fulfilled, and his/her participation will be in the interest of the Department and the Institute.

Classes and administrative work of the faculty concerned during her/his absence are satisfactorily arranged.

I do not recommend for the following reasons (please specify the reason)

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Date:

SIGNATURE
HEAD OF DEPARTMENT