

**संकाय द्वारा सम्मेलन/कार्यशाला/निजी विदेश दौरे में भाग लेने के लिए आवेदन का प्रारूप**

**Performa for application to attend Conference/ Workshop/Personal Visits to Abroad by Faculty**

1	Employee Name & Emp Code	
2	Designation & School/Centre	
3	Specify the type of visit ( <b>please v</b> ) (Mention the title of the conference/workshop etc) Also, attached the specific invitation letter/brochure etc.	Conference <input type="checkbox"/> Workshop <input type="checkbox"/> Collaboration <input type="checkbox"/> Research Visit <input type="checkbox"/> Personal Visit <input type="checkbox"/> Title _____
4	Duration and actual dates of the above visits	From _____ To _____ (Total days: _____)
5	Specify the place of visits/country name etc.	
6	Detail of Expenses, in INR	IITMandi to Delhi/Chandigarh and back = _____ International travel = _____ Accommodation expenses= _____ Registration fee = _____ VISA fee = _____ DA = _____ Any other expenditure= _____ <b>Total:</b> _____
7	Source(s) of Funding ( <b>Please v</b> ) Give project number, if from Project.	PDA <input type="checkbox"/> PDF <input type="checkbox"/> Host Institutions <input type="checkbox"/> Self <input type="checkbox"/> Project <input type="checkbox"/>
8	Details of Leaves to be availed (VL /EL/SCL/CL/On duty (out of station etc.) ( <b>PIs specify F.N/A.N</b> ) Attach justification in case of leave applied more than the actual duration of the conference/visits Date of proceeding and rejoining at IIT Mandi	Type of Leave/On duty _____ No. of Days _____ From _____ to _____ Prefix : From _____ to _____ Suffix : From _____ to _____ Proceeding on _____ Rejoining on _____
9	Alternate teaching arrangement. Willingness of faculty & his/her Signature	Course Name/No. Name: _____ Sign: _____
10	Any other relevant information if any	

**Signature of the applicant with date**

**Signature of Chairperson with date**



**For School Office ONLY:**

Available: CL SCL

Available Funding in School Research Grant:  
(If this source of funding/leave is mentioned by applicant)

Sign Dealing Assistant

Available: PL

**For SRIC Office ONLY:**

Available Funding in PDF/Project relevant head and **within the purposes of the grant:** (If this source of funding is mentioned by applicant)

Sign Dealing Assistant

AR/DR SRIC

**For Finance Office ONLY:**

Available Funding in PDA:  
(If this source of funding is mentioned by applicant)

Sign Dealing Assistant

AR/DR(F&A)

**For Faculty Establishment Office ONLY:**

Available: VL: EL:

Details of previous abroad visits in current academic semester:

Venue:  
Dates:  
Funding Source:

Venue:  
Dates:  
Funding Source:

Venue:  
Dates:  
Funding Source:

JA/SA/JS

AR/DR  
(Faculty Establishment)

Recommended/ Not Recommended

Dean (Faculty)/ Associate (Dean Faculty)

Approved/ Not Approved

Director