

OFFICE OF RESEARCH, INNOVATION & COMMERCIALIZATION

Conference Funding Form

I. Event Details	
Name of the Department	
Title of Event	
Venue	
Dates	
Time	
Scope of the Event	
Expected outcomes of the Event	
Detail of previous Conferences Organized by the relevant Department (if any)	

II. Coordinator/Focal Person						
Name	Designation	University & Department	Mobile No.	Contact no. (office)		
E-mail address						

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III. Details of National & Foreign Speakers (If Any)					
Number of Invited Speakers:					
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	nding Details and Sponsors	ship from other	Sources for the Event		
Sr#	Subject		Amount (Rs.)		
1	Requested Amount from ORIC				
2	Total Estimated cost of the	Event			
3	Financial Assistance from c	other sponsors.			
4	Expected Income from Registration (if applicable)				
	i (ii applicable)		1		
V. Fina	ancial Assistance from Oth	er Sponsors			
Name of the Sponsor		-	Amount (Rs.)		
VI. Ju	stification of amount reque	sted			
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VII. Conf	II. Conference Website Link				
Ţ	ax deductions must be applied on all payments as per the Govt. rules				
(Note: The ORIC funding is limited to Rs. 300,000/- for holding Conference.)				
-	Signature & Stamp of the Focal person				
	signature & Stamp of the Focal person				
<u></u>	Signature of the Chairperson of the Department				
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Ē	Endorsement from the Dean				
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