## **UNIVERSITY OF DELHI**

## APPLICATION FOR GRANT OF FINANCIAL SUPPORT FOR ATTENDING INTERNATIONAL CONFREENCE/ SEMINAR / SYMPOSIUM ETC. ABROAD

| 1.  | Name                     |            | 2.  | Designation                     |          |
|-----|--------------------------|------------|-----|---------------------------------|----------|
| 3.  | Department               |            | 4.  | Exact Title / Name of the       |          |
|     |                          |            |     | International Conference /      |          |
|     |                          |            |     | Seminar / Symposium             |          |
| 5.  | Exact Place of the       |            | 6.  | Specific Period Dates of the    |          |
|     | Conference / Seminar /   |            |     | conference / Seminar /          |          |
|     | Symposium                |            |     | Symposium                       |          |
| 7.  | Name of the              |            | 8.  | Whether seeking financial       |          |
|     | sponsoring authority of  |            |     | support for the first time      |          |
|     | the conference /         |            |     |                                 |          |
|     | seminar / symposium      |            |     |                                 |          |
| 9.  | ,                        |            | 10. | Are your presiding over the     | Yes / No |
|     | financial support from   |            |     | conference                      |          |
|     | UGAC during the          |            |     | Or Chairing a Session           | Yes / No |
|     | preceding 5 years? If    |            |     | Or invited to deliver Key       | Yes / No |
|     | yes, please mention      |            |     | Note Address                    |          |
|     | year and month           |            |     | Or invited to present your      | Yes / No |
|     |                          |            |     | paper                           |          |
|     |                          |            |     | Or invited for Poster Session   | Yes / No |
|     |                          |            |     | Or invited for a talk / Lecture | Yes No   |
| 11. | Approximate Air-Fare     |            |     |                                 |          |
|     | by Economy Class and     |            |     |                                 |          |
|     | by Shortest Route / (In  |            |     |                                 |          |
|     | Indian Currency)         |            |     |                                 |          |
| 12. | Do you require           |            | 13. | Have you enclosed the           | Yes / No |
|     | Registration fee? If so, |            |     | Invitation letter               |          |
|     | mention the amount       |            |     |                                 |          |
|     | (in Indian Currency or   |            |     |                                 |          |
|     | U.S. dollar)             |            |     |                                 |          |
| 14. | State the title of your  |            | 15. | Have you enclosed an            | Yes / No |
|     | paper                    |            |     | abstract or a copy of your      |          |
|     |                          |            |     | paper to be read by you         |          |
| 16. | Have you enclosed a      | Yes / No 1 |     | Any other information that      |          |
|     | copy of the letter of    |            |     | you would like to supply        |          |
|     | acceptance of the        |            |     |                                 |          |
|     | paper                    |            |     |                                 |          |

**NOTE:** 1. The applicant must fill up each column clearly and submit all enclosures. Incomplete application shall not be considered by the UGAC.

| 2. | Application shall be submitted by 15th April and 15th October every year for Conference etc. scheduled for Summer Vacation |
|----|--|
| ar | d Autumn Vacations, respectively.  |

| Delhi-110007 |  |  |
|--------------|--|--|
| Dated :      |  |  |

Recommendation of the Head of the Department

Signature of the Teacher / Applicant

Head of the Department