



NATIONAL INSTITUTE OF TECHNOLOGY RAIPUR

G.E. Road, Raipur – 492010 (C.G.)

Website: www.nitr.ac.in, email: dean_rnc@nitr.ac.in

Fax no:-0771-2253934

GRANT /REIMBURSEMENT FOR REGULAR STUDENTS (FOR PRESENTING PAPER IN INTERNATIONAL (IN INDIA)/NATIONAL CONFERENCES

PART A: GENERAL INFORMATION

1. Name of the Student: _____ 2. Roll No.: _____
3. UG/PG/Ph.D. _____ 4. Sem. & Dept. _____ 5. Sex (Male/Female): _____
6. Category (Gen/OBC/SC/ST): _____ 7. Phone No. _____ 8. Email id. _____
9. Amount requested (In Figs): _____ 10. Financial year (1st April to 31st March) _____

PART B: EVENT INFORMATION

11. (a) Name of the Conference : _____

(b) Nature of Conference (International (In India)/National) : _____ (c) Venue: _____

(d) Dates: From _____ to _____ (e) Details of Organizer: _____

12. Details of paper: (a) Paper Title, author and co-author details (copy of the manuscript to be attached):

13. Details of financial assistance acquired from other agencies and/or event organizer:

14. Details of expected expenditure:

1. Train Fare by the shortest route (to and from): _____
2. Registration Fees: _____
3. Per diem Allowance: _____

Total Expected Expenditure in Rupees (in figures and words): _____

I ensure that I have not received any fund on similar grounds from NIT Raipur in this financial year. I also certify that the details given above are correct and I am a regular student of this Institute. I will present the paper and submit the details and documents of expenditure incurred to NIT Raipur. If the information supplied is found to be incorrect, I will refund the entire money. **I will present the paper along with 4 slides about NIT Raipur.**

Enclosures:

- a) Announcement of the event b) Invitation/acceptance letter from the event organizer.
c) Copy of accepted paper d) NOC from co-author (if any) :-

Recommended/not recommended
(Head of the Department)

Recommended/Not recommended
(Supervisor Name & Signature)

Approved /Not Approved

Dean(R&C)

Note: Approval for requested visit does not mean approval of requested amount. Expenditure will be reimbursed as per institute rules/norms.

Annexure A

NO-OBJECTION FROM CO-AUTHOR/s

(Required only if Co-author/s is/are an employee of NIT Raipur)

I, hereby, declare that I am a co-author of the paper mentioned above and give my consent to _____ For attending the event_____. I further declare that no claim will be requested on my behalf for the same paper/presentation.

(Signature of the Co-Author/s)

CERTIFICATE

With reference to the event _____, this is certified that _____ has presented his/her paper and shared event experience in the department before faculty members on _____ at _____.

(Head of the Department)

Note: The candidate has to make a presentation in the department to share the conference experiences. A Certificate to this effect signed by Head of the Department should be submitted at the time of making a claim for the reimbursement of travel support.
