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**भारतीय प्रौद्योगिकी संस्थान भुवनेश्‍वर │ Indian Institute of Technology Bhubaneswar**

**Administrative-cum-Financial approval**

**Application for Permission to Faculty Members to Attend Conference / Symposium/ Workshop/Training Programs/Visits for Collaborative Research Programs/Field trips/Visits for data collection** **etc., and Drawal of Advance**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. | Name: | | | | 2. | | Employee Code: | |
| 3. | Designation: | | | | 4. | | School: | |
| 5. | Details of the Conference / Seminar/Symposium/ Workshop: | |  | | | | | Duration: |
| 6. | Title of the paper: | |  | | | | | |
| 7. | Type of Presentation : | | Oral/ Poster/ Paper/ any other, please specify. | | | | | |
| 8. | Mode of Presentation: | | ONLINE/IN-PERSON | | | | | |
| 9. | Place of visit: | |  | | | | | |
| 10. | Period of absence including journey period: days, From: To: | | | | | | | |
| 11. | a) Details of Leave on Duty or any Other Leave required:  In case of Vacation Leave, please specify the number of VL availed in the current academic year:  b) Station Leaving permission: Yes / No; If Yes, please mention the duration: | | | | | | | |
| 12. | Estimated Expenditure excluding the support from any external sources to be claimed and details of advance required: | | | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | Details | Estimated Expenditure (INR) | Admissible Rate (%) | Advance Amount (INR) | | 1. Registration Fee |  | 100% |  | | 1. Travel (Airfare/Rail fare) |  | 90% |  | | 1. DA (Accommodation + Food Charges) |  | 50% |  | | 1. Local Travel |  | Nil |  | | 1. Other Expenditure |  | Nil |  | | 1. **Total (in Rs.)** |  |  |  | | | | | | | | | |
| 13. | Details of partial support from any sources: | | | | | | | |
| 14. | Advance required, if any : Yes/No | | | | | | | |
| 15. | State whether any advance is pending adjustment (Give details) | | | : | | | | |
| 16. | NOC required for travel/VISA | : Yes / No; If Yes, please mention Passport No.: | | | | | | |
| 17. | Details of alternative arrangement for Academic / Research / Administrative responsibilities during the period of absence | | | | |  | | |

I do hereby state that I will submit details of utilization against the advance within 10 days of the drawal and adjust the same within 15 days from the date of completion of conference / seminar / Symposium/ Workshop etc.

Supporting documents to be attached for perusal of Head of School/ Dean FA/Director:

1. Invitation Letter
2. Acceptance of paper/ Oral/ Poster to be presented
3. Abstract of the Paper
4. Supporting document for claiming Registration fees
5. Travel Itinerary
6. Details of financial support if any as paid by the hosting organization
7. Details of visits for collaborative research programs/training programs/

field trips/visits for data collection

*Signature of the Applicant*

**Recommendation of Head of the School/Department**

**(Please note that this form is to be submitted to the Finance and Accounts Section)**

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**(For Finance and Accounts Section Use)**

Details of CPDA utilization and balance:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Block Year | From: ………………. |  | To: ……………....... |  |  |
| Opening Balance (Carried Forward from previous block) | Current Block Amount | Total Fund Available | Amount claimed/ submitted for the **Current Block** | Balance Amount | Current Claim |
|  |  |  |  |  |  |

**Dealing Assistant/JA/JS (F&A Section)**

**AR / SO (F&A)**

**(For Faculty Affairs Section Use)**

1. Number of Days of Leave on Duty /SCL/Vacation admissible during the year: ………….. is …………… days.
2. Number of days of Leave on Duty /SCL/ Vacation availed during the year: …………………….. , ………………...days.
3. Number of days of Leave on Duty /SCL/Vacation requested: ………….Days, From …………………….To ………………
4. Station leave details: ………….Days, From …..……………………………………….To ………………………………………………….
5. Estimated amount to be sanctioned: …………………………..
6. Advance Recommended: ………………………..……………….

Submitted for approval.

**Dealing Assistant/JA/JS/SO (FA)**

**AR (FA)**

**Dean FA**

**Director**

**(For Faculty Affairs Section Use to issue approval order in the following template)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Approval Order** | | | | | |
| * For intimation to the Faculty Member and official records in case of Approval * For the issue of NOC for VISA, if required * For updating the leave account | Name | | Purpose: | | |
| **Total Expenditure Approved (in Rs.):** | **Advance details:** | | | |
| **Terms & Conditions:**   * The said advance is to be paid on: * The amount would be settled as per rules on the submission of bills and reports. | | **Particulars** | **Amount (Rs.)** |
| 1. Registration Fee (100% of Rs. ) |  |
| 1. Air/ Rail fare (90% of Rs. ) |  |
| 1. Per Diem (50% of Rs. ) |  |
| **Total Advance (Rs):** |  |
| **Approved Leave and other details:** | | | | |

**AR (FA)**

**To:**

**Finance and Accounts Section** for processing of payment/advance and settlement of bills as per the approval.

**JA/JS/SO (F&A Section)**

**DR /AR (F&A)**

**Registrar**