



Maulana Azad National Institute of Technology Bhopal (M.P.) India

मौलाना आजाद राष्ट्रीय प्रौद्योगिकी संस्थान भोपाल मध्यप्रदेश भारत

Annexure- A

APPLICATION FORMAT FOR REIMBURSEMENT OF REGISTRATION FEE & TRAVELLING ALLOWANCE FOR ATTENDING THE COMPETITION / CONFERENCE / WORKSHOP/ STUDY TOUR / COURSE BY UG STUDENTS

Department:

Event Details

(Competition / Conference/Workshop/Short Term Training/Course / Industry Visit / Study Tour)

(Please tick)

| S. No. | Points | Remarks (Please tick/ comment) |
|--------|--|--|
| 1 | Name of Candidate (if more than 1 candidate attach separate List) | |
| 2 | Scholar No. & Branch Name (if more than 1 candidate attach separate List) | |
| 3 | Mobile Number (If Multiple Students. Write Team leader number) | |
| 4 | Name of Event (<i>Competition / Conference/Workshop/Short Term Training/Course / Industry Visit / Study Tour</i>) | |
| 5 | Name of Institute which is organizing event | |
| 6 | City of Event | |
| 7 | Mode of Competition/Conference/Workshop/Short Term Training/Course | Online/ Offline |
| 8 | Date of Event | Total Days from to |
| 9 | Total Period of Academic Leave (If Required) Including Travel days | Total Days from to |
| 10 | Registration Fee, if applicable (per student) <i>(for reimbursement as per 12.1(1) of UG Ordinance 2024)</i> <i>(If Event is Organized by MANIT then student can attend program free of cost vide Dean (ID&IR)/2024 dated 3/7/2024)</i> | |
| 11 | Paper Title (<i>for Conference Paper Presentation only</i>) | |
| 12 | Conference/Workshop/Short Term Training/Course approved by DUPC (as per CPDA Norms) | Yes/ No (If yes, please attached the marked list) |
| 13 | Conference/Workshop conducted at IITs, IIMs, IISc & Conferences whose papers are published in SCOPUS Journals /Web of Science/SCI/SCIE | Please Specify & enclose the relevant documents |
| 14 | If the Students are availing financial support from Sponsored research / Consultancy projects of his /her supervisor (s). The Recommendation of supervisor shall include the Information about his research and consultancy project and clearly mention the type of funding. (<i>UG Ordinance 2024 12.1 (4)</i>) | Yes/ No (If yes please specify the project and attach the recommendation of the supervisor) |
| 15 | Attach the copy of relevant document of Event (Conference/Workshop/Competition etc) | Numbers of Pages |

Undertaking :-

I Declare that the above information is given by me is true.

Name & Signature of the Student/Students

1..... 2 3.

4. 5. 6.

7. 8. 9.

Recommendation: Recommended / Not Recommended

Name & Signature of Mentor/s

Mentor 1.....

Mentor 2.....

Signature of
DUPC Coordinator

Signature & Seal of HoD

To,
AR (Academics)