$\begin{array}{c} \text{VISVESVARAYA NATIONAL INSTITUTE OF TECHNOLOGY, NAGPUR} \\ \underline{\text{Application for Approval through } CPDA} \end{array}$

Submitted:

	1. Name of Faculty Member:				_
	2. Designation: AGP De	epar	tment:	Year of Entry:	_
	3. Leave applied (C.L./ Sp.C.L.): From		To	/ On	_
A)	National / International Conference	:			
	(Please fill up Annexure - 1)				
A.1)	Conference Organizers (Enclose documents)	:			
A.2)	Title of Paper (Enclose paper, Acceptance letter)				
A.3)	Venue of the Conference	:			
A.4)	Date of the Conference	:			
A.5)	Whether proceedings will be published under Web of Science / Scopus	:			
A.6)	Seminar date in the Department	:			
A.7)	Registration Fees	:	Rs.		
B)	Any Other Purpose	:			
B.1)	Purpose	:			
B.2)	Justification (enclosed documents, if any)	:			
B.3)	Duration	:			
B.4)	Alternate arrangements made for academic / administrative work during the absence from VNIT	:			
4.	Cost of air travel out of India (Including all taxes) (Attach Certificate from Air India)	:	Rs.		
5.	Cost of travel within India	:	Rs.		
6.	Accommodation / Hotel Charges	:	Rs.		-
7.	Any other information/claim (attach documents):			-
8.	Total Financial Requirement excluding DA	:	Rs.		

Date: Signate

Signature of the Faculty / Staff

1. Remarks by HoD :	
2. Comments by Dean (R&C)	
3. Comments by Dean (FW)	
4. Comments by Dean (P&D)	
5. Recommendation by the Director : Recommended / Not Recommended	
6. Permission by the Chairman (In case of International Travel): Approved / Not Approved / Discuss	
7. To AR Establishment : To issue Office Order if Approved by the	e Director / Chairman

Annexure-1

1.		List of a previous International Conferences attended / papers presented [Brief description with dates, nature of leave, financial source & amount (while in VNIT)]:								
	natu	Title	Venue Venue	Date	Gran	t Name				
	1									
	2									
	3									
	4									
2.	Is this paper a part of own research / supervised research									
3.	State whether first / second / Author									
4.		ernate arrangements made for academic absence from VNIT								
5.	Nature of Leave Requested for extended stay, if any (CL/SPCL/EL/Vacation)									
6.	Bala	ance Leave Details (Balance EL will be fi	lled by Estt. Section)	CL	SCL	EL				
7.	If po	eriod of absence is more than two weeks		1						
	Arra	angement for R&D Projects /								
	Adn	ninistrative Responsibilities								
8.		ence of the person who will should ence of the Faculty Member								
9.		ase give the justification of your visit abattached separate page).	road for the specified period							

Date: Signature of the Faculty / Staff