

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RISHIKESH

APPLICATION FORM FOR FACULTY SEEKING PERMISSION TO ATTEND SCIENTIFIC MEETINGS/CONFERENCE/SYMPOSIUM/SEMINAR/WORKSHOP/SHORT-TERM TRAINING OR COURSE OR PROGRAMME:(INDIA / ABROAD)

(FOR VISIT ABROAD ONLY)

1.	Name, Designation & Department			
2.	Date of Birth			
3.	Date of appointment as Faculty member			
4.	Name of the event			
5.	City/State/Country where the proposed meeting/conference/symposium/seminar/workshop/short - term training is to be held.			
6.	Duration of the proposed meeting with dates			
7.	Name of the organizer of the event			
8.	Status of the organizing institution (Please tick the relevant one)	Private/Govt./Govt. funded/scientific association/non-profit non-govt. organization/others. In case of others specify.		
9.	Whether the applicants is attending the entire period of event. If not, indicate the actual date(s) of participation			
10.	Intended date of departure from the Headquarters & from venue and joining back to the duty	Date of departure from HQ	Date of departure from venue	Date of joining back duty
11.	Categories of participation (Please encircle the relevant one)	Presenting scientific paper/to chair/ co.chair a scientific session/ to deliver lecture as invited speaker or faculty in workshop/ invited to participate the event (without financial support from AIIMS, Rishikesh) invited for availing of training in a specified course or programme offered by universities? Please specify and attach documentary evidence.		
12.	Name of the funding agency to meet the expenditure for the proposed visit. Specify the component of financial support required from AIIMS, Rishikesh.	In case from AIIMS, Rishikesh, the following will be the components funding:-		
		Registration fee	Rs.	
		Air-fare	Rs.	
		Visa fee	Rs.	
		Hotel accommodation charges	Rs.	
		Per-diem	Rs.	
		Medical Insurance premium subject to ceiling of Rs. 3000/-	Rs.	
Total	Rs.			

13.	State the facilities in terms of air-fare, boarding, lodging and remuneration/ honorarium etc. being provided by the organizer/host institution or any other institution/agency. Attach documentary evidence in support of the same.		
14.	In case funding from other than AIIMS, Rishikesh status of funding agency to meet the expenditure for the proposed visit. (Please encircle the relevant one)	Private/Govt./Govt. funded/scientific association/ non-profit non-govt. organization. In case of others, specify.	
15.	In case funding from parent Institute, furnish the following:-		
	(a) Acceptance letter of scientific paper in PDF duly signed by the concerned authority of organizer.		
	(b) Copy of abstract of scientific paper		
	(c) Invitation letter to participate in the event (in case of without financial support from AIIMS, Rishikesh) or invitation letter to chair/co-chair the scientific session or to deliver lecture as in invited speaker/faculty in workshop or invitation letter for availing of training in a specified course or programme offered by university.		
	(d) Brochure of the event		
	(e) Consent from all co-authors for presentation of scientific paper		
	(f) Research Project under which the work was carried out.		
	(g) Ethical clearance for the said project work.		
16.	Name, date and destination of last event attended abroad with financial support from AIIMS, Rishikesh.		
17.	Whether departure, joining and participation reports submitted in r/o last academic event attended.		
18.	Name the faculty who will look after the duties during the applicant's absence from headquarters for the purpose.		

Certified that the details furnished above by me are true and correct to the best of my knowledge and nothing has been concealed. I also undertake that my participation in the aforesaid meeting/conference/symposium /workshop/short-term training etc. is in accordance with the existing guidelines of the Institute and I will furnish the participation certificate and report as soon as I return from the same.

Date:

(Signature of the applicant)

FOR HEAD OF THE CONCERNED DEPARTMENT ONLY

A. In case more than one faculty member(s) is attending the proposed event from the Department/Centre concerned, the following information may be furnished:-

Sl. No	Name & designation of the faculty member	Actual duration of absence for the purpose from the Institute

However, the above faculty members have to submit their separate application in the prescribed proforma for considering them for permission.

B. Faculty members who will be available in the concerned Department/Centre during the period of absence of the applicant and as at part "A" of above, from the headquarters

Sl No.	Name & designation of the faculty member

(While forwarding the application(s) of faculty member(s) for such purpose, the Head of the Department should ensure the availability of 50% of faculty members on duty during the period of their absence from headquarter).

**Recommendations of the Department
with signature, date and Office stamp**