

Request for Contingency grant (Conference / Lab Visit)

Date.....

Name of Student.....SAP/ID.....

Year and Month of Registration: January / July Phone No.....

Name of Supervisor.....Name of School.....

Amount already Consumed.....

Amount Proposed.....

Remaining Amount.....

Travel/ Lab Visit		
1	Name of Conference/ Name of Lab	
2	Date of Conference & Place of Lab visit.	
3	Support Required	
	a) Travel*	
	b) Registration	
	c) Accommodation#	

I have attached the abstract of the research work that will be presented in the above conference.

Name of Scholar..... Signature of Scholar.....

Name of Supervisor..... Signature of Supervisor.....

(Accepted abstract or acceptance of lab visit by the lab is mandatory)

Note: DA will not be provided. Original bills of expenses must be submitted.

Recommended by

Approved by

Associate Dean(R&D)

Dean (R&D)

After approval, a copy of this form should be submitted to the Cluster Head and Research Coordinator for records.

*To and for travel by bus or train (sleeper class); local travel by cab is permissible.

Accommodation charges are limited to Rs. 1000/- per day or actual, whichever is less.