

D. Y. PATIL EDUCATION SOCIETY, KOLHAPUR

(Deemed to be University)

(Declared u/s 3 of the UGC Act 1956 vide Notification No. F.9-26/2004-U.3 dt. 01-09-2005 of the GOI)

Reaccredited by NAAC with 'A+' Grade

869, 'E', D. Y. Patil Vidyanagar, Kolhapur-416 006 Phone No. : (0231) 2601235-36, Fax: (0231) 2601595

Web: www.dypatilunikop.org, E-mail: info@dypatilkolhapur.org

RESEARCH SUPPORT SCHEME

Financial Assistance for attending Conferences/Workshops/Seminars, etc.

The following rules are made to attend the Conferences/Seminars, etc.

- **1.** The conference/seminar/symposia etc. must be from State or National or International (organized in India only) level.
- **2.** The Teacher must take prior permission from the University for attending the conference/seminar/symposia etc. by applying through proper channel with invitation which must be in his name.
- **3.** The participation such as presentation of Research Paper, Poster Presentation or Chairing the session, etc. will be the criterion to be considered for eligible for grant.
- **4.** The teacher must submit true copy of the attendance certificate.
- **5.** The University has reserved the right to assess from expert regarding innovation/academic importance of the research paper/poster for considering eligible for grant.
- **6.** The following committee shall consider the cases and recommend the amount of grant to concerned teachers:

1)	Vice Chancellor	Chairmen
2)	All Constituent Unit Heads	Member
3)	Associate Dean, R & D	Member

4) Dr. V.V. Bhosale, Registrar Member Secretary

- **7.** The committee may recommend to award the amount of registration charges, traveling expenses, lodging/boarding expenses etc. within the limits of the budget provisions partly or fully.
- **8.** Financial Assistance will be awarded once in a year.



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Application form for financial assistance for Participating in Conference/Workshops/CME, etc.

	Date: / /20
Full Name : (Capital Letters)	
Designation :	
Department :	
Mob . No. : Email:	
Name of College:	
Details of Conference/Workshops/CMEs	
Name/Title :	
Status : International / National / State / District	
Dates : Place :	
Organized by :	
Participation Details:	
(Guest Speaker/Invited talk/Resource Person/Paper presentation/Poster Presentation	ition/Chairperson/Judge)
Title:	
Financial Assistance received/sanctioned from any other funding agencies or	sponsors: Y N
Amount: Rs	
Financial Assistance expected from University:	
Registration Charges:	
Travelling Exps:	
Sign. Sign.	
Applicant Head of the Department	Sign.
	· ·
List of documents to be attached (Originals/True Copies)	· ·
	Sign. Dean/Principa l eipts of charges paid

- 1. Attendance only as delegate for the conference will **not** be considered for financial Assistance.
- 2. Prior permission of the University after approval of Dean/Principal is must. Otherwise financial assistance will not be given.