Ref. No.:_____(to be filled in at TEQIP office)	**Date:**

BIRLA VISHVAKARMA MAHAVIDYALAYA (BVM) ENGINEERING COLLEGE
VALLABH VIDYANAGAR -388120, GUJARAT, INDIA
TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME FUNDS
(TEQIP FUNDS)

Proposal for Attending Conference / Training Courses / Seminars / Workshops
(for faculty and staff)

Name of the Faculty / Staff:	Designation:	Type of the Event: Conference / Training programme / Seminar / Workshop / Others (specify)
Department:	Basic Pay with AGP:	
Name of the event:		
Name and address of the event organizer:		
Duration and date(s):		
For a conference write title of the paper. For other events mention purpose of attending with reference to TEQIP Funds objective:		
Date & time of departure from BVM:_____ Expected date & time of returning to BVM: _____		
Total estimated expenditure involved (in INR): ₹_____ (Rupees _____ _____) Please give details overleaf (registration fees, traveling cost, etc.)		
(1) A copy of advertisement / invitation / brochure of the event (clearly indicating details of place, registration cost, and duration) is attached herewith. (2) Abstract (along with ordered list of authors) of the paper (if applicable) is attached herewith. (3) I shall submit a brief report indicating the outcomes of the event to the Nodal Officer (Academic), Principal, and to the TEQIP office at the time of submitting the final bills. (4) I shall abide by the prevailing norms. (5) If a vehicle is to be hired through TEQIP office, a separate application in prescribed format shall be filled. If more than one person is attending the event(s) at the same place than the vehicle should be hired on *shared basis*.		

Signature of Applicant: _____

Proposed visit is as per his/her latest TNA. His/her academic load will be adjusted.	The proposal is appropriate for FSD activity of TEQIP Funds.	Budgetary provision is checked. Pay advance of Rs. _____
Head of the Department	Academic Officer, TEQIP Funds	Finance Officer, TEQIP Funds

Remarks (if any):	Approved / Not Approved
TEQIP Funds Coordinator	Principal

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History of expenditure incurred by the applicant under FSD of TEQIP Funds (to be filled in by the applicant): (Attach separate sheet if needed):

Sr.	**Title (with Reference No.)**	**Expenditure (INR)**
1		
2		
3		
4		
5		
6		
	Total	

Details of estimated expenditure for this proposal:

Sr.	Particulars	Amount (Rs.)	Remarks (if any)
1			
2			
3			
4			
5			
6			
	Total		

Name and Signature of the faculty/staff with date