

RAJIV GANDHI INSTITUTE OF PETROLEUM TECHNOLOGY, RAEBARELI

Office of the Faculty Affairs

APPLICATION FOR TRAVEL SUPPORT

PF NO

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1. Name, Designation and Department:

2. Date of Joining the Institute: Date: Month..... Year.....

3. Period of previous travel abroad :

From:- Date Month..... Year.....

To :- Date Month..... Year.....

4. Sources(s) and Extent of support for previous travel:

Support Head	Source(s)	Extent of Support Full/Half/Amount
Travel		
Registration Fee		
Tuition Fee		
Local stay		
Others		

5. Nature of proposed travel (please enclose original brochure, if any, indication fee etc.)

(a) Name of Conference, Seminar,:

Symposium, short school etc.

(b) Venue:

(c) Period: (No. of Days) From..... To

5. Nature of participation:

☐ Presenting invited paper (no. of papers =.....)

☐ Presenting contributed Paper(no. of papers =

☐ Chairman of the session

☐ Keynote Speaker

☐ General Reporter

☐ Participating as a Lecturer

☐ Participating as a resource person

☐ Participating as a Visitor

☐ Others (please specify)

6. Title and Author(s) of the paper(s) to be presented:
(enclose copy of acceptance letter)

7. Is the paper essentially based on the work done at RGIPT, Rae Bareli ?

8. Extent of support required:
(enclosed relevant documents wherever applicable)

Travel: Rs.....

Computation of currency exchange

Registration Fee: Rs.....

Tuition Fee: Rs.....

Local stay: Rs.....

Others: Rs.....

Total: Rs

9. Extent of outside support available

For travel: Rs.....

Others : Rs.....

(hospitalities etc.)

Source(s)

Source(s)

10. Importance of participation to the Department and the Institute:
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11. Please attach a separate sheet listing papers published in International Research Journals since joining RGIPT/since last International Conference attended with RGIPT support (token support not to be counted).

Date:

Signature:

RECOMMENDATIONS OF THE HEAD OF DEPARTMENT

☐ I recommend full/partial support, as the guidelines for travel support are fulfilled, and his/her participation will be the interest of the Department and the Institute.

☐ I do not recommend for the following reasons (please specify):

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Date:

SIGNATURE OF HEAD OF DEPARTMENT