INDIAN INSTITUTE OF TECHNOLOGY PALAKKAD

PROFORMA FOR SEEKING INSTITUTE PERMISSION IN INTERNATIONAL/ NATIONAL (Conference/Symposium/Work Shop/Training) EVENT						
 2. 3. 4. 5. 6. 7. 8. 9. 	Name of the Faculty Designation & Depa Date of Joining the Name of the Event Nature of the Event Dates of Event Location of Event Role of the Faculty Organizer Travel Plan : i) Date of Onwar ii) Date of Return Breakup of Expected	y member: artment : Institute : : : : From : member in the E Chairing a sessi d Travel :	National Interna To vent:	itional] Poster	
Registration Fee Airfare Stay and Boarding Others if any Total (In Rupees) 11. Financial Support:						
Ce	Advance amount re rtified that the details te:		true and correct.	Signature of	f Faculty Member	
FOR OFFICE USE Balance of funds available in CPDA Signature : AR(Finance) Recommendation of AR(Administration)						
	Registration Fee	Airfare	Hotel Expenses	Per diem	Total (In Rupees)	

Signature of AR(Administration)

Approved by Dean (Admin)

Director

* Kindly attach the Paper Acceptance/Invitation / details of the event