



अखिल भारतीय आयुर्विज्ञान संस्थान, जोधपुर
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, JODHPUR

Part-A

**Application for permission to attend National/ International Scientific Meetings/
Conference/ CME/ Symposia/ Seminars/ Workshop/ Short Term Trainings, etc.**

1	Name	
2	Designation	
3	Department	
4	Date of joining	
5 a	Name of the event/assignment	
5 b	Nature of event (Conference/ CME, etc.)	
5 c	National or International	
5 d	Venue and Place of the event	
5 e	Dates and Duration of the conference	
5 f	Any pre or post conference event applied	
6	Your role (Speaker/ Presenter/ Chair, etc.)	
7	Details of your role (Title/ Session, etc.)	
8	Nature of leave (AL/ CL/ EL, etc.)	
9	Dates and Duration of leaves applied	
10	Sunday/ GH as Prefix and Suffix (if any)	
11	Total leave period from the department	
12	If the event falls in the vacation period?	
13	Applying for (Tick the requested head): (i) TA (ii) DA (iii) Registration Fee (iv) Any other (specify) (v) Total (vi) Advance Required	Funding requested from the institution (i) (ii) (iii) (iv) (v) (vi)
14	Honorarium details (if any)	
15	Other financial support (if any)	
16	Total number of conferences / CME/ Workshops, etc. attended in current financial year: No. of institution funded conferences / CME/ Workshops, etc. in the current financial year: No. of LRA supported conferences / CME/ Workshops, etc. in the current financial year:	

Signature of the faculty member



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Part-B

1. How will your participation in conference/workshop/short term training/CME/academic visit, in question, help in your work at this institute.

2. Checklist for the applications seeking permission for attending National/ International Scientific Meetings/ Conference/ CME/ Symposia/ Seminars/ Workshop/ Short Term Trainings, etc.

S. No.	Document	Yes/ No
1.	Brochure of the event/ assignment	
2.	Invitation letter/ Abstract acceptance letter for your role	
3.	Abstract of the paper/ poster accepted for presentation	
4.	IEC approval/waiver letter	
5.	NOC from all investigators of the project/ case	
6.	Details for funding support from other agencies (if any)	
7.	Surety (for international conferences)	
8.	Undertaking (for international conferences)	

Undertaking by the applicant

I certify that the information mentioned/furnished above by me are correct to best of my knowledge and nothing has been concealed.

Signature of the faculty member

Remarks from the Head of Department

I recommend / DON'T recommend the attendance of the faculty in the conference applied for.

I will ensure attendance of at least 50% of the department faculties during his/ her leave period, and that his/her absence for the leave period would not hamper the routine functioning of department.

Reason for NOT recommending:

Signature of the Head of Department