## D.E.Society's

Brijlal Jindal College of Physiotherapy, Pune



6.3.2

A sample Application form for availing financial assistance for paper presentation and publication



## APPLICATION FORM

Date:	
The assistance will be provided only if all documents are submitted on time	
Name of the applicant:	
Post/Year of studying:	
For Teachers only-	
University approval: Yes/no	
No of Experience: Yrs.	
Last assistance availed date and type:	
For students only-	
Year: I/II/III/IV/Internship/MPT	
Name of Guide:	
Last assistance availed date and type:	
Purpose of application: Assistance for- Presentation/Publication/Travelling	
Details-	
Name of conference/Journal:	
Type of conference/Journal: State/National /International	
Title of research:	
IEC approval: Yes/No	
Authorship: First/second/third/other	
Name of co-authors:1)	
2)	
3)	
Mode of presentation: Oral/poster/key note speaker/ delegate/other(producumentary evidence/acceptance letter)	vide
Enclosures: 1)	
2)	
3)	
Deccan Education Society's Brijlal Jindal College of Physiotherapy ,Pune –Policy document for "Research presentation financial assistance"	

## UNDER TAKING BY FACULTY/STUDENT

I certify that,

- The details given above are correct.
- If the information furnished in this application is found to be incorrect at a later date, I shall reimburse the entire money to the Institute
- In case financial assistance is received from the organiser or any other agency, I shall pay back the amount granted by the Institute
- I shall abide by the decision of the Institute.

Name and Signature of Faculty/Student:

Date:

	TARGETA FOR O	OFFICE USE AT REGALI	
Application No:			
Date of application	on:		certify that,
Documents subm modification/una		Form: Acceptable/needs	
	2) Enclosures: appro	priate/need further documenta	al poof/unacceptable
	3) Last availed assist	ance details: Date:	edi Ana Ma
		Amount:	Rs
		Type:	
		of Ficulty Smeral.	
Nama and Ciana	ure of authority:		Date:

	ATION OF PRINCIPAL					
approved/Not approved/Approved with special consideration						
marks:						

## **DECISION LETTER BY INSTITUTE**

(On institute letterhead)

Application No:	, Date:	Type:	
Title of research,			
			0
			X
nas been approved/not ap	proved by the Institute.		
You will be receiving assi	istance of	Rs for	
Purpose.			3
		X 1	
Sign of the Principal:		Seal:	Date:
		Journ Land	Dute.
	Sotherapy *		
	300	ma P	
	Social Pall Palling	Da	
	Solepune 18/11/0	PRINCIPAL	
	all lan	D E Society's Brijlal Jind College of Physiotherapy	al
		Pune_4	