

Annexure:
Proformas for applications

To
The Dean
RDDCRC, Nagpur.
Through: Research Committee

REQUEST FOR PRIOR PERMISSION TO ATTEND CONFERENCE

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Name of Conference	
5	Dates of the conference	
6	Oral/Poster presentation (as presenter)/ Guest speaker/ faculty	
7	Title of Presentation	
8	Date of joining the present institute	

Signature of staff member

Date: / /

Signature of HOD

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May be sanctioned for prior permission only:

Dean

Enclosure: Invitation letter as guest speaker/paper or poster presentation

acceptance where applicable

Note:

- 1) This permission is only for the purpose of records with Research Committee. Hence leave application should be submitted separately to Dean office, DCRC.

- 2) Staff members should submit all relevant bills and documents within 10 days of their return from the conference to research committee (in R.C. form 2) along with copy of prior permission (R.C. Form 1) for availing travel grant.

To
 The Dean
 RDDCRC, Nagpur
 Through: Research Committee

REQUEST FOR REIMBURSEMENT OF CONFERENCE EXPENSES (after attending)

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Name of Conference	
5	Dates of the conference	
6	Oral/Poster presentation (as presenter)/guest speaker/faculty	
7	Title of Presentation	
8	Details of amount requested i) Registration fees: ii) Travel: iii) Accommodation iv) Total	
9	Have you availed any amount earlier in the calendar year for conference :if yes, amount.....	

I hereby declare that I have not received any funds for the same conference from any other agency

Signature of staff member

Signature of HOD

Date: / /

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Admissible amount:	
Earlier grant availed:	
Amount that can be sanctioned:	

Chairperson, Research Committee

Sanctioned

Dean

Enclosure: Invitation letter as guest speaker/paper or poster presentation acceptance where applicable

Note:

- 1) Staff members should submit this form along with all relevant bills and documents within 10 days of their return from the conference to Research Committee along with copy of prior permission for availing grant.

To,
The
Secretary,
VAHE,
Nagpur.

Through: The Dean, RDDCRC, Nagpur.

**REQUEST FOR PRIOR PERMISSION TO ATTEND CONFERENCE/WORKSHOP.
(Overseas)**

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Name of Conference	
5	Dates of the conference	
6	Oral/Poster presentation (as presenter)/guest speaker/faculty/workshop participant	
7	Title of Presentation	
8	How you are attending this conference will be useful to the department/institute.	
9	Have you availed any amount earlier in the calendar year for conference: if yes, amount.....	

In hereby declare that I have not received any funds for the same conference from

any other agency

Signature of staff member
Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Remark

Secretary VAHE

Note:

Staff members should submit in RC form 2 all relevant bills and documents within 10 days of their return from the conference to Research committee along with copy of prior permission for availing grant.

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR PUBLICATION INCENTIVE

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Details of publication With title, Authors, coauthors, journal, year, volume, page no and index	
5	Whether Thesis publication? Yes/No	

Signature of staff member
Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Sanctioned

Dean

Enclosure: Copy of publication

To
 The Dean
 RDDCRC, Nagpur
 Through: Research Committee

REQUEST FOR ANNUAL STUDY ALLOWANCE

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Budget with details, duration of the study and likely date Of completion.	
9	Have you availed any amount earlier for annual study allowance, if yes, amount and date.....	

Signature of staff member

Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Remark

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR PG THESIS RESEARCH ALLOWANCE

1	Name of PG student	
2	Name of the guide	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Budget with details, duration of the study and likely date of completion.	

Signature of PG student
of HOD
Date: / /

Signature

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Remark

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR PG STUDENTS'RESEARCH ALLOWANCE

1	Name of PG student	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Budget with details, duration of the study and likely date of completion.	

Signature of PG student
of HOD
Date: / /

Signature

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Chairperson, Research Committee

Signature of the Dean

Remark

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR UG STUDENTS' RESEARCH ALLOWANCE

1	Name of UG student	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Budget with details, duration of the study and likely date of completion.	

Signature of UG student
of HOD
Date: / /

Signature

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For Office Use

Chairperson,
Research Committee

Signature of the Dean

Remark

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR COLLABORATIVE PROJECT GRANT

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
5	Study title	
6	Principal investigator	
7	Co investigator	
8	Details of Collaborating institute/department	
9	IEC approval detail	
10	Budget with details, duration of the study and likely date of completion.	

Signature of staff member

Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Remark

To
 The Dean
 RDDCRC, Nagpur
 Through: Research Committee

REQUEST FOR RD INNOVATION FUND FOR CLINICAL/ACADEMIC RESEARCH AND DEVELOPMENT

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Budget with details, duration of the study and likely date of completion.	
9	Have you availed any amount earlier for RD INNOVATION FUND, if yes, amount and date.....	

Signature of staff member
 Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Remark

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

REQUEST FOR COPYRIGHT INCENTIVE

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Details of the Copyright With title, Name of Applicant, Coauthors and Year	

Signature of staff member
Date: / /

Signature of HOD

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For Office Use

Chairperson, Research Committee

Sanctioned

Dean

Enclosure: Certificate of Copyright.

To
 The Dean
 RDDCRC, Nagpur
 Through: Research Committee

REQUEST FOR PATENT INCENTIVE

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Details of the Patent With title, Name of Applicant, coauthors	
5.	Date of Application,	
6.	Date of Publication in Government gazette	
7.	Date of grant of certificate	
8.	Stage of disbursal.	

Signature of staff member

Date: / /

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Signature of HOD

For Office Use

Chairperson,
Research Committee

Sanctioned
Dean

Enclosures:

- a. Application of Patent with acknowledgement
- b. Copy of publication in the gazette.
- c. Certificate of grant of Patent.

To
The Dean
RDDCRC, Nagpur
Through: Research Committee

APPLICATION FOR BEST UG STUDENTS' RESEARCH PROJECT

1	Name of UG student	
3	Department	
4	Study title	
5	Principal investigator	
6	Co-investigator	
7	IEC approval detail	
8	Details of the project, duration of the study and date of completion.	
9.	Whether it is published? Yes/ No	

Signature of UG student
of HOD
Date: / /

Signature

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For Office Use

Chairperson, Research Committee

Signature of the Dean

Enclosures:

1. Copy of Synopsis of the Research project.
2. Project Completion Report
3. Copy of Publication

To
The Dean,
RDDCRC, Nagpur.
Through: Research Committee

REQUEST FOR REIMBURSEMENT OF EXAMINATION FEES FOR
SWAYAM COURSES

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Date of Examination	
5.	Details of Examination	

Signature of staff member
Date: / /

Signature of HOD

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Research Committee

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Dean

Enclosure: Certificate of Examination.

Receipt of examination fees paid.

To
The Dean,
RDDCRC, Nagpur.
Through: Research Committee

REQUEST FOR INCENTIVE FOR ADDITIONAL DEGREE
QUALIFICATION

1	Name of Teaching Staff Member	
2	Designation	
3	Department	
4	Details of the Qualification	
5.	Date of grant of degree certificate	

Signature of staff member

Signature of HOD

Date: / /

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For Office Use

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Research Committee

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Dean

Enclosures:

- a. Copy of degree certificate.