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| UGC LOGO 1 copy | UNIVERSITY GRANTS COMMISSIONSanothimi, Bhaktapur, Nepal |  |
|  |
| **Application Form for Travel Grants** |

* + - 1. **Applicant's information**

|  |  |
| --- | --- |
| Full Name |  |
| Sex  | Male ( ) Female ( ) |
| Age  |  |
| Date of Birth |  |
| Highest Degree |  |
| Citizenship |  |
| Underprivileged group, if applicable | Janajati ( ) Dalit ( ) Others ( ) |
| Temporary Address |  |
| Permanent Address  |  |
| Email |  |
| Phone no |  |
| Mobile no |  |
| Name of the institution (Currently working) |  |
| Address of the institution  |  |
| Contact No |  |
| Designation |  |
| Mark with \*  | Full timer ( ) Part time ( ) |
| Main Responsibilities  |  |

* + - 1. **Program Detail**

|  |  |
| --- | --- |
| Name of the program |  |
| Type of the program  | Tick the right choice: Seminar, Conference, Workshop, others …………. |
| Type of involvement (Mark with \*)  | Key note speaker |  |
| poster presentation |  |
| oral presentation |  |
| participation only |  |
| Other involvement ……….. |  |
| Relevancy of the program  |  |
| Date of the program |  |
| Venue (city/country)  |  |
| Organizer name and address |  |
| Website  |  |
| Contact person and email  |  |
| Title of the paper intended to present  |  |
| Author/Co-other  |  |
| Abstract |  |
| Ongoing UGC project if any (Mark \*)  | **Yes ( ) No ( )** |
| If Yes, mention title : |  |

* + - 1. **Financial Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| Have you approached support for funding to any others? | If 'yes' indicate the item and status | Mention the purpose (Registration/ Support for travel/ Boarding and Lodging/ Any other | Amount  |
| Institution currently working with |  |  |  |
| Organizer/host |  |  |  |
| Any other sources |  |  |  |
| Funding requested to UGC |  |  |  |

* + - 1. **A.** have you availed the travel grants provision in the last fiscal year? Yes No

**B.** Previous travel grants support form UGC

|  |  |
| --- | --- |
| Date |  |
| Event |  |
| City/Country |  |
| Amount |  |

* + - 1. **Confirmation by the Institution head**

I certify that the statements made above by the candidate have been verified and found true. If the applicant is selected for the grants, he/she will received full support and guidance by the Institution.

Name of the Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**6. Undertaking by the applicant**

I hereby undertake and affirm that:

* The substance of the research paper being presented (as indicated above) is based on the original research conducted by me / us. In case any plagiarism is proved, apart from penalties imposed, I would refund entire amount of grants.
* The above paper has not been presented before in any conference/workshop etc. and also has not been published elsewhere.
* All the information provided above is true to the best of my knowledge and belief.
* The grant amount received will be used for the purpose of which it is requested

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Document Checklist**

|  |  |  |
| --- | --- | --- |
| **G1. Before the Program** (Mark with √ ) |  | **After the Program** |
| A cover letter signed by the applicant | √ |  | A cover letter signed by the applicant  |
| Invitation/Acceptance letter  |  |  | Certificate of the program attended  |
| Itinerary of ticket  |  |  | PP presentation  |
| Conference brochure |  |  | Copy of visa |
| Complete application form  |  |  | Ticket and bills |
| CV |  |  | A narrative report of the program  |
| Citizenship |  |  | Mention if any other funding sources support for travel including your institution  |
| Letter of recommendation from the institution (clarifying that the applicant is full/part timer) |  |  | Boarding pass  |
| Copy of abstract |  |  | Name of Bank, Account Number and Branch |