



# INDIAN INSTITUTE OF INFORMATION TECHNOLOGY KALYANI

## APPLICATION FOR APPROVAL/REIMBURSEMENT UNDER CPDA

(FOR ATTENDING EVENT/CONFERENCE (NATIONAL/INTERNATIONAL/SEMINAR/WORKSHOP/TRAINING PROGRAMME))

To: The Registrar

### Part - A : General Information

1.	Personal File No.:		3.	Designation:	
2.	Name:		4.	Department:	
			5.	Sex: (M/F)	Phone No.:
6.	(a) Blocked year of CPDA:		(b) CPDA allocated for current year:		
	(d) Total CPDA available (b+c):		(c) CPDA carried over from last year:		
	(e) Amount already claimed/approved/obtained from the CPDA in the current financial year:		(f) Net CPDA available (d-e):		
7.	Amount requested in this application (Estimated):				
	Space to show break-up:				

### Part - B : General Information

8.	Name of Event/Conference/Seminar/Workshop/Training Programme/Host Institute/Collaborator: ↓				
9.	Theme:				
10.	Venue:				
11.	From:		To:		12. Nature of Event: (National/International)
13.	Details of Organizer:				
14.	Purpose of Visit: (✓ sign may be used)	(a) Chairing the Session		(b) Invited Talk/Delivering Plenary Lecture/Keynote Speech	
		(c) Oral Presentation		(d) Poster Presentation	
		(e) Laboratory Visit:			
		(f) Visit for Collaborative Research:			
		(g) Any other:			
15.	Have you attended any conference/event in the past and current semester funded by IIIT Kalyani? (Yes/No) (If yes, provide details) →				
16.	Details of Paper(s):				
	(a) Number of papers to be presented:				
	(b) Title of paper(s) to be presented: (attach copy of paper)				
	(c) Nature of the paper (Single/Co-authored):				
	(d) Co-authors name, address, designation and highest qualification:				
	(e) NOC from Co-authors obtained: (Yes/No)				

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17.	Travel Plan (from the place of work to the conference and back)			
	DATE	TIME	FROM (Place)	TO (Place)
18.	Details of financial assistance acquired/being acquired from other funding agencies and/or event organizer:			
19.	Details of expected expenditure:			
	Sl. No.	HEAD		AMOUNT
	1.			
	2.			
	3.			
	4.			
	5.			
	Total:			

Note: Approval/Permission for requested visit does not mean approval of requested amount.  
Expenditure will be reimbursed as per institute rules/norms.

20.	Alternate arrangements made for academic/administrative work during the absence from IIIT Kalyani:	
21.	Nature and days of leave requested for stay: (CL/Special Leave/EL/Vacation)	

## CERTIFICATE

I certify that:

- The details given above are correct.
- I am a regular faculty of this institute.
- If the information supplied is found to be incorrect; I will refund the entire money to the institute.
- The money received will be used for the purpose for which it is sanctioned.
- I will present the paper and share conference experience with the institute after attending the event.

Recommended / Not Recommended

Signature of the Applicant

(Signature of the Registrar  
with comments)

Approved / Not Approved

Signature of the Director

### NOTE:

- The candidate has to report to Faculty Coordinator about the outcome of the visit.
- Leave details and work load adjustment should be verified by Faculty Coordinator before recommendation.

### ENCLOSURES:

- Announcement of the event
- Invitation letter from the event organizer/Host Institute/Collaborator
- Copy of accepted paper
- NOC from co-author (if any)