DR. BABASAHEB AMBEDKAR MARATHWADA UNIVERSITY, AURNAGABAD.

CIRCULAR No.2 BCUD/ CONF/G./2017-18.

It is hereby notified for the information of all concerned that the applications for allocation of funds for holding Conference/Seminar/Symposium/Workshop are invited form the Heads of University Department and affiliated colleges of this University. The proposals for grant of funds should be made in the prescribed proforma. The proposals reach this office on or before 31 Aug 2017.

Copies of the application forms and the norms prescribed for allocation and utilization of funds for organization of Conference/Seminar/Symposia/Workshop are enclosed for information and guidance.

The above proposal for holding Conference/Seminar/Symposium should be decided & approved in the Departmental committee. Kindly supply the -

- 1) The names and designation of members of the committee appointed by the Principal / Departmental Committee.
- 2) A copy of the minutes of the meetings of the committee where the proposal for holding Conference /Seminar was approved.

INCOMPLETE APPLICATIONS AND THOSE RECEIVED AFTER THE ABOVE DATE WILL NOT BE ENTERTAINED.

All concerned are therefore, requested to note the contents of this circular for their information guidance.

University Campus][
Aruangabad.-431004.][
Ref. No. BCUD/STAT/Conf/2017-18/1365-69][
Date:- 25/07/2017][

menarge Officer

Copy forwarded with compliments for information and necessary action:-

- 1] The Heads of all University Department, Dr. Babasaheb Ambedkar Marathwada University, Aurangabad.
- 2] The Principals of all Affiliated Colleges, Dr. Babasaheb Ambedkar Marathwada University, Aurangabad.
- The Head of all University Department Dr. Babasaheb Ambedkar Marathwada University, Sub-campus Osmanabad.
- 4] The Finance & Account Officer, Account Section, Dr. Babasaheb Ambedkar Marathwada University, Aurangabad.
- 5] The Manager Publication Unit, Dr. Babasaheb Ambedkar Marathwada University, Aurangabad.

Dr. Babasaheb Ambedkar Marathwada University, Aurangabad.

Application for Grant of Funds for Holding Conference/Seminar etc.

 01. Name of the Department/College/Institute. 02. Name of the Convener with designation and address. 03. Full title of the Conference/Seminar with subject in detail. 04. Dates of the Conference/Seminar. 05. Status of Conference/Seminar International/National/State/Regional. 06. Expected number of participants:- 1) Local 2) Form Marathwada 3) Other participants of Maharashtra 4) Other State 5) Other countries. 	
7. Registration / Delegation Fee Charged for participant@	
Budget Estimates:-	
G) Estimated Receipts	
i) Registration / Delegation Fee	
ii) Grants:-	
 08. Dr. Babasaheb Ambedkar Marathwada University, Aurangabad. 09. Other agencies ICSSR/UGC/CSIR/ICMR/CAR/DST.Etc iii) Advertisement:- 	
vii) Any other sources	
Total Estimated Receipts:	
H) Estimated Expenditure:- i) Stationery ii) Printing iii) Cyclostyling / Xeroxing iv) Postage v) Telephone vi) TA,DA to Delegates/Resource persons/Special Invitees. vii) Transport viii) Boarding ix) Lodging inclusive of Coffee/Tea, Breakfast, Lunch, dinnar etc. x) Entertainment programmed / Excursion xi) Seminar material xii) Contingencies xiii) Remuneration to ministerial staff Total estimated expenditure.	
Place:- Date:- Signature of the Convener	
Date: Signature of the Convener	
Forwarding remarks of the Head of The Department	
Place:- Date:-	