

MAHARAJA RANJIT SINGH STATE TECHNICAL UNIVERSITY (Estb. By Punjab Govt vide Punjab Act No. 5 of 2015 & under section 2 (f) of the UGC Act at SNo 428) DABWALI ROAD, BATHINDA (Punjab) -151 001	
Dr SAVINA BANSAL PhD (Engg) FIE, FIETE, SMCSI	Office Of DEAN (RESEARCH & DEVELOPMENT)

DRD/MRSSTU/033
Dt 12.1.2016

(Through mail)

Dear Principals/Directors
(all Affiliated and Constituent colleges)
MRSSTU, Bathinda

Sub: Inviting Applications for availing Partial Financial Assistance from MRSSTU–in regards

As per the University notification issued vide Reg/46 dt 16.12.2015 and communicated to you vide DRD/MRSSTU/021(1) dt 21.12.2016, kindly find enclosed herewith formats of the prescribed application, evaluation, sanction and Reimbursement cum Utilization certificate form to apply for partial financial assistance for the conduct of FDPs, Conferences, Symposia etc in the current financial year. Pl note that only those activities shall be considered, which can be completed in the stipulated time as per the notified norms and whose reimbursement cum utilization certificates can be submitted to the University **by 15.3.2016 complete in all respects**.

Hard copy of duly filled Applications forms, only on the prescribed performa complete in all respects, shall be considered and **must reach this office by 18.1.2016 (5pm)**.

Incomplete or late forms shall not be considered.

-sd-

DEAN (R&D)

(no separate hard-copies are being sent)

CC to:

1. PA to VC for information
2. Registrar, MRSSTU for information
3. Director ITES to upload the letter and performa on University Web-site

MAHARAJA RANJIT SINGH STATE TECHNICAL UNIVERSITY BATHINDA

(Estb by State Govt of Punjab vide Punjab Act No 5 of 2015 & under section 2(f) of the UGC Act and listed at SNo 428)

DABWALI ROAD, BATHINDA (Punjab) 151 001

(For office use only): Application Form No: #

APPLICATION FORM**FOR SANCTION OF PART- FINANCIAL SUPPORT IN ORGANISING NATIONAL/ INTERNATIONAL CONFERENCE/ SYMPOSIA/ FACULTY-DEVELOPMENT PROGRAMS & RELATED ACTIVITIES***(ALL DATA GIVEN BELOW IS PRE-EVENT PROPOSED / ESTIMATED DATA ONLY)*

1.	Complete Name of the Event (Attach Gol approval/Applied for in case of International Event or Foreign delegate movement)					
2.	Name and complete address .of organizing University Deptt / Constituent / Affiliated College (with e-mail id and web-site)					
3.	Name and complete address of the Institute Principal / Director (with mobile contact & mail-id)					
4.	Duration/Dates & Place of Activity					
5.	Chief Organizer Details (with mobile contact & mail-id)					
6.	Proposed Information brochure details with organizing teams including University officials in Advisory/ Program committees (Attach a draft copy)					
7.	University Faculties: Engg & Tech, Pharmacy, Commerce & Mgt, Sciences, Hospitality & Tourism Mgt, Arch & Planning, Humanities & Soc Sc					
	Mention proposed event faculties					
8.	Related Univ. Discipline/ Deptt					
9.	Number of Participants/ Delegates expected	Affiliated colleges		Outside		TOTAL
10.	Proposed Total Expenditure (Rs)					
11.	Is the same activity held earlier? (If Yes, Give details on previous)					
12.	Attach Session wise details (Session Chair/ Co-Chair, Key note speaker, Expert, Resource Person as applicable etc)	Day-1	Day-2	•	Day-n	
		Session 1.				
		Session 2				
		Session n				
13.	Proposed Chief Guest (Name with designation)					

14.	Brief Objective of the Proposed Development activity in context to Punjab, J&K, and India and R&D activity around (not more than 100 words)	
15.	Proposed Program output format/ Proceedings & evaluation format/ mechanism for FDP related, Publishing house & Qty	
16.	Grants reimbursed from University for any other activity during ongoing Financial Year (give detail, status & UC, if over)	

17.	Expected Expenditure (in Rs)	Expert Session/ Session Chair (TA/DA/Hon)	18.	Source of Funds (in Rs)	Registration Fee	
		Printing/Proceedings etc			Other Sponsoring Agencies (specify)	
		Refreshments/Hospitality			Advertisements	
		Boarding/Lodging			Exhibition stalls	
		Activity kit			Proceedings sponsor	
		Any other (specify)			Any other (specify)	
		TOTAL			TOTAL	
18.	Amount Requested for reimbursement in Figures	Amount Requested for Reimbursement in words	Seed Money Desired (Yes/No?)			
19.	Organizing College bank details	NAME OF THE BANK	NAME OF BRANCH	ACCOUNT NO	IFSC CODE	

20. DECLARATION: I HEREBY DECLARE & CONFIRM -

- That, I have read the notification / regulations of the University for the conduct of proposed event and reimbursement of sanctioned amount thereof, very carefully and understood them thoroughly. I assure to abide by them.
- That, the information given in this form is true, complete and accurate. Further no information or other material information has been omitted. I attest the accuracy and authenticity of this document. In case of any lack of confirmation, I lose my right of candidature for such activities.
- That, I shall deposit the audited event total expenditure report for the fund allocated for reimbursement along-with this performa again with proposed data replaced with factual / actual data after the event.

Sign of organizing official/secretary	Name & Address:
Sign of Principal with date & seal:	Name & Address:

EVALUATION FORM**FOR PART- FINANCIAL SUPPORT IN ORGANISING NATIONAL/ INTERNATIONAL CONFERENCE/ SYMPOSIA/
FACULTY - DEVELOPMENT PROGRAMS & RELATED ACTIVITIES**

No	ACTION				REMARKS
University Accounts Department					
1.	Availability of Budget and funds for the Institute under consideration to organize this event (Yes/No)				
2.	Whether organizing college has pending university dues on last event organized? (Yes/No)				
3.	Amount already sanctioned during this FY to this Institute for any other activity				
4.	Name, designation & Signature of dealing accounts officials with date				
University R&D Department					
5.	A committee of following officials is constituted to examine and evaluate the submitted proposal in the light of University regulations and submit its recommendation intimating whether conduct of the event shall be fruitful/ meaningful for students, staff, faculty and/or Research scholars?				
	No	Name	Deptt/Section		
	1.				
	2.				
	3.				
	Name, designation & Signature of authorized R&D officials with date				
Evaluation Committee Report					
6.	Comments of the evaluation committee on Utility of event and amount recommended for reimbursement (in words and figures):				
7.	Recommendation (tick Mark)	Event Strongly Recommended	Event Recommended	Not-Recommended	
	Sign of Committee				
University Dean (R&D) Department					
8.	The Proposal is Allowed/ Disallowed		ALLOWED		DISALLOWED
	Signature of Dean (R&D)				
9.	Seed Amount Transferred Details (account section)				
10.	Name, Sign & Date of Intimating official				

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Dr SAVINA BANSAL PhD (Engg) FIE, FIETE, SMCSI	Office Of DEAN (RESEARCH & DEVELOPMENT)

Ref No. : DRD /MRSPTU/

Dated :

SANCTION FORM

FOR SANCTION OF PART- FINANCIAL SUPPORT IN ORGANISING NATIONAL/ INTERNATIONAL CONFERENCE/ SYMPOSIA/ FACULTY - DEVELOPMENT PROGRAMS & RELATED ACTIVITIES

Sanction is hereby granted for reimbursement of Part-Financial Support to (Name of the College) -----
----- in Organizing (name of the event) ----- at (place) -----
during the financial Year 201X – 201X on (dates of activity) ----- .for Rs -----
subjected to the successful submission of the following documents:

1. The original application form with proposed data replaced by actual data
2. A certificate that the activity was organized at the college premises from ----- to ---- date.
3. Pictures, media reports (if any), 3-copies of information brochure, awarded certificates (sample) and event outcome in the form of proceedings
4. Duly Filled Reimbursement cum Utilization certificate
5. Documents regarding support of all other agencies who co-sponsored the activity
6. A report if any other academic/co-curricular activity has been conducted along-with the main activity
7. Certificate that the sanctioned part financial support was utilized for the purpose for which it was sanctioned.
8. Audited UC shall be furnished as per requirement.
9. If any agency not mentioned in application has supported the event, the financial support of the university shall be paid back.
10. Any ugly incident happened / noticed during the activity, shortcomings and suggestions/Feedback report

DEAN (R&D)

MAHARAJA RANJIT SINGH STATE TECHNICAL UNIVERSITY, BATHINDA

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DABWALI ROAD, BATHINDA (Punjab) 151001

REIMBURSEMENT FORM-CUM-UTILIZATION CERTIFICATE

(PART-FINANCIAL SUPPORT IN ORGANISING NATIONAL/INTERNATIONAL CONFERENCE/SYMPOSIA/
FACULTY-DEVELOPMENT PROGRAMS & RELATED ACTIVITIES)

Name of the host Institution _____

Income and Expenditure account of _____ held from _____ to _____

(Name of event)

SNo	Summary	(In Rupees)
1	Total Income(Details as per Annexure-A)	
2	Total expenditure Incurred(Details as per Annexure-B)	
3	Deficit/surplus	
4	Amount already received from the University as seed Grant	
5	Amount to be released by the University from the sanctioned Grant	

It is further certified:

1. That, expenditure has been made within the prescribed norms and for the purpose it was sanctioned. If any irregularity is detected during inspection/regular audit, action will be taken to regularize the same as per the rules.
2. That, we shall bear the responsibility for all applicable mandatory tax liabilities
3. That, institute shall keep all expenditure related documents including bills, cash memo etc in lieu of the financial assistance, ready in case, required by the University for Audit or any other reason.

(Sign of organizing official/Secretary)

Principal/Director
(with seal)

(for office use)

Checked, Verified and entered by:

Clerk, (R&D Office)

Recommended/Not-Recommended

AR/Supdt (R&D office)

DEAN (R&D)

Finance Officer

ANNEXURE-A

INCOME		(In Rs)
SNO	PARTICULARS	AMOUNT
1	Registration fee	
	No of Participants (i) _____ x _____	_____
	(ii) _____ x _____	_____
	Total	
2	Financial Support from	
	AICTE/ DST/ CSIR/ University/ Other Agencies	(i)
		(ii)
		(iii)
		(iv)
		(v)
	(Total)	
3	Sponsorship amount	
	Organization 1	
	Organization 2	
	Organization 3	
	Organization 4	
	(Total)	
4	Sale of proceedings, if any	
5	Any other Income	
	Grand Total	

ANNEXURE-B**RECORD OF EXPENDITURE MADE (In Rs)**

SNO	Bill No.& Date	Name of Expenditure Head	Amount	Required For	Convener Signature
		TOTAL			

(Principal/Director)
Official seal