



B.M.S.COLLEGE OF ENGINEERING, BANGALORE-560 019
TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME-III (Comp.1.3)

APPLICATION SEEKING FINANCIAL ASSISTANCE TO ATTEND A PROGRAMME
(For the use of BE/ME/PhD student of the college)

1	Name of the student		
2	Category		SC/ST/GEN/OBC
3	Year of admission to BE /M.Tech/PhD		
4	Name of the Department		
5	Contact Details	Cell Number / Land Line number	
		E-mail ID	
6	Name of the Guide & contact No.		
7	Title of Training/workshop/conference		
8	Broad Area of Training/workshop/ confere		
9	Programme Venue		
10	Name of the Training Provider (specify Institution or Industry)		
11	Training Type (Tick any one)	(a) Seminar (b) Conference (c) Workshop (d) Symposium	
12	Scheduled dates (from and to)		
13	Duration of Training (Excluding Journey Dates)		
14	Date of onward Journey		
15	Date of Return Journey		
16	Approximate Total Cost in Rs (As per Annexure-I)		
17	In case of paper presentation in conference seminar, a)Title of the paper b) Name of the co-author/s		
18	<u>Declaration:</u> I hereby declared The same research paper has not been presented/published elsewhere by me or any other co-author/s		
19	Enclosures: 1. Full Paper 2. Brochure of the programme 3. outcome of the programme		

Date:

Signature of Trainee
(Name.....)



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Recommendation and signature of the Guide	
Recommendation and Signature of the HOD	
Recommendation and Signature of the Nodal Officer (Academic Activities)	
Recommendation and Signature of the Nodal Officer (Finance Activities)	
Signature of the TEQIP coordinator	
Signature of the Principal	

Annexure-1:

Details of Expected Expenditure for attending Programme

Sl. No.	Particulars	Amount
1.	Registration / Course fee (in Rs.)	
2.	Conveyance (in Rs.) Train/Bus fare(To & Fro) Onward Journey: (Date: / / Time:) From:..... To..... Return Journey: (Date: / / Time:) From:..... To..... C) Bus (Local-to & fro) Onward Journey: (Date: / / Time:) From:..... To..... Return Journey: (Date: / / Time:) From:..... To.....	
Total		

(Total in words.....)

Date: / /

Signature of Trainee

(Name:.....)

Signature of the Guide

Signature of the HOD

(Name:.....)

(Name:.....)