

COUNCIL OF SCIENTIFIC AND INDUSTRIAL RESEARCH HUMAN RESOURCE DEVELOPMENT GROUP CSIR COMPLEX, OPP INSTITUTE OF HOTEL MANAGEMENT LIBRARY AVENUE, PUSA, NEW DELHI- 110012, INDIA Email: tgsm[at]csirhrdg[dot]res[dot]in Phone:011-25841037

Travel Grant Scheme for young Indian researchers (Ph.D. students, Research Associates, Resident Doctors, etc.), Emeritus Scientists / other non-regular researchers for participation in International Scientific events abroad

MAIN APPLICATION

1. Full Name Dr/Mr./M	ls				
(In CAPITAL letters)	First Name		Middle Name	La	st Name
2. Date of Birth:	Date	Month	n Year		
3. Gender: Male □	☐ Female [
4. Nationality:		-			
5. Designation/ Curren	nt Affiliation:				
6. Applicants address f	for Communication	1:			
CityState	e	Pin			
Contact No with STE) code	Mob	e-mail ID		
7. Place of Work: Dept:			Institute		_
CityState		Pin_			
8. Contact details of Sup					
Contact No with STD	code_	_ Mob	E-mail ID_		
9. Educational qualification	ations:				
Degree	University / Instit	ute	Year of Passing/ Expected Completion Date	%age of Marks	Division
1. M Sc / MBBS / BE/ B Pharma /					
(Pl tick mark $$)					
2. PhD / MD / ME/ M Pharma/					
(Pl tick mark $$)					
3. Others					

10. Field of Specialization:			
11. Indicate your Basic Pay/Salary per month Rs			
12. Name of Scientific Conference /Symposium/ Workshop			
13. Venue (City/ Country) :/			
14.			
14. Dates (DD/MM/YY): From _//20to/20			
15. Major discipline in which it falls (Pl tick mark $$)			
\Box Chemical Sciences \Box Life Sciences \Box Engineering \Box Mathematical Sciences			
Physical Sciences			
□ Medical Sciences □Multi-disciplinary □IT/ITES/Information Sciences			
 16. Whether presenting a research paper: Oral Poster Training/Workshop (Attach copy of the abstract and letter of acceptance from the organizers) 17. Purpose of visit & its possible impact in the Indian context: (Attach separate sheet) 			
 18. Financial support already assured/approached from other sources: Organizer: Parent Organization: Any other: (Attach copies of letters if already sanctioned) 			
19. Estimated cost of Air Fare : Rs(<i>Attach estimate from Govt. approved agent</i>)			
20. Amount of assistance requested from CSIR for Air Fare. Rs			
In case the grant is sanctioned, the journey should be strictly performed by the shortest route in excursion economy class and International Travel can be made by private airlines. Tickets must be purchased by utilizing the services of Government Authorized Travel Agents only viz. M/s Balmer Lawrie & Company, M/s Ashok Travels & Tours and IRCTC as warranted under Govt. of India orders in this regard.			

21. State the name of the Authority (Director, registrar, Dean or any other designated authority) of society/Institution/organization to whom the grant can be released. (Please note that the grant cannot be released to an individual's account):_____

22. Research papers published in indexed journals by the applicant in the last 5 years. (*Attach Reprints of the two best papers. Do not include abstracts, conference proceedings etc.*)

S. No	Names of all authors	Title of the paper	Name of the Journal and Volume, Year and Page Number
1			
:			

23. Details of foreign travel assistance received, if any, from CSIR in the last 3 years:

Organization	Year (Date)	Place Visited	Sanction No.	Amount Received (in Rs.)

24. Any other information:

25. I further declare that the information furnished above is correct and that I have not availed support from CSIR in the last 3 years under this Scheme.

Date:	Signature of the Applicant
Place:	

To be filled by the Supervisor

(Application should not be forwarded beyond the enrolment / tenure period of the candidate)

Recommendation of the Head of the department giving justification and relevance for seeking assistance:

It is also certified that the information provided by the applicant is correct.

Signature of the Supervisor	Signature of the Director/ Registrar/ Dean/ Principal / Head of the Institution
Name:	Name:
Date:	Date:
	Seal: