



# Form 1 Kamdhenu University

## Application for granting permission for National or International Seminar / Workshop / Symposium / Conference / Visit / Group or Review Meeting / Training Programme.

Title of Programme			
Venue of Programme			
Schedule of Programme	Date	From :	To :
Schedule of Journey	Departure Date & Time :		Arrival Date & Time :
Name & Designation			
Office Address			
Date of Birth			
Qualification (Field of Specialization)			
Present Responsibility			
Number of attended programmes during the year			
Justification and utility of the proposal			
Title of the paper accepted			
Paper accepted for			
Anticipated expenditure on Registration			
T. A. / D. A.			
B. H. in which expenditure is to be debited			
Mode of travel			

**Note:** Enclose the information brochure / acceptance / nomination received from the organizers of the programme etc.

**Signature of the Applicant**

Recommendation of the Department Head:  
No.  
Date:

**Recommended/Not Recommended**

**Department Head**

Recommendation of the Principal:  
No.  
Date:

**Recommended/Not Recommended**

**Principal**

**For office use only**

Remarks/Recommendation of the Registrar/DR:  
No.  
Date:

**Recommended/Not Recommended**

**Registrar/DR, KU, Gandhinagar**