VIVEKANANDHA COLLEGE OF ARTS AND SCIENCES FOR WOMEN (AUTONOMOUS) RESEARCH AND DEVELOPMENT CELL

Elayampalayam, Tiruchengode, Namakkal 637 205

PROFORMA FOR AVAILING INCENTIVE FOR GRANTS

Conference grant/Seminar grant/Symposia grant/Research grant

(please ✓ whichever is applicable)

- Name of the Faculty :
 Designation and Department :
 Total years of experience :
 Date of joining in this College :
- 5. Details of financial assistance requested (*describe briefly*)

| 6. | Name of the funding agency | : |
|-----|----------------------------|---|
| 7. | Amount sanctioned | : |
| 8. | Date of sanction | : |
| 9. | Date of UC submitted | : |
| 10. | Outcome | : |

Declaration

The information provided is true to my knowledge. I have submitted the report to IQAC, RAC and Department. Date:

Place:

Signature of the applicant

