

NARULA INSTITUTE OF TECHNOLOGY
TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME

To Chairman TEQIP

From:

Subject: Application for attending pedagogy training at IIT-Kharagpur

I Mr./Mrs. _____, HOD
_____ on behalf of the department do hereby
declare that the below mentioned faculty members have been
selected for attending pedagogical training at IIT-Kharagpur from
__/__/__ to __/__/__ under Faculty and Staff Development
initiative under the aegis of TEQIP Phase-II, Sub. Component 1.1.
I also undertake that all classes and duties have been adjusted
without affecting the daily class routine.

Name:

Designation:

.....

E-mail:

Authorised Signatory with Seal

Sl.No	Name of Faculty member	Designation	Duration
1.			
2.			
3.			

Contact details of the Organization:

- (a) Name of the Coordinating organization:
- (b) Name of Head program Coordinator:
- (c) Address:
- (d) Contact details:

Program details:

- (a) Name of Training program:
- (b) Duration:
- (c) Total Registration fee for _____ Nos. Faculty: Rs
- (d) Mode of payment:

Enclosures:

- _____ Nos. application forms of faculty members.
- Curriculum vitae.
- Course module of the pedagogy training.
- Registration details/documents.

FOR OFFICE USE ONLY:

Checked by, TEQIP CELL	Nodal officer Finance (TEQIP)	Coordinator (TEQIP)	Chairman (TEQIP)
BOG-Chairman			

**NARULA INSTITUTE OF TECHNOLOGY
TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME**

To
Chairman

Through: Head Of the Department, _____

From:

Subject: Application for attending pedagogy training at IIT-Kharagpur

I Mr./Mrs. _____, <Designation> of <Department> hereby state that I want to attend the pedagogical training at IIT-Kharagpur from ___/___/___ to ___/___/___ under Faculty and Staff Development initiative under the aegis of TEQIP Phase-II, Sub. Component 1.1.

I also undertake that all classes and duties have been adjusted

without affecting the daily class routine.

The registration fee for the above training is amounting to Rs: _____ (Rupees _____ only). The payment mode for the same is through Cash/DD in favour of: “_____” payable at “_____”.

Total budget (attached as Annexure-A) for the training is Rs. _____. (Rupees _____ only).

Therefore I kindly request to provide me financial assistance from TEQIP fund.

I also Undertake the following:

- (i) I shall abide by the norms specified in the PIP of TEQIP Phase-II regarding faculty and staff development norms and the related regulations of expenditure mentioned in the permissible/non permissible table.
- (ii) I shall submit the copy of all other details including certificate, original money receipt, and bills of other sundry expenses.

Kindly accept and approve.

Thanking you,

Enclosure:

- Curriculum Vitae
- Registration Details
- Budgeted expenditure

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<Name>
(<designation>, <department>)