

NARULA INSTITUTE OF TECHNOLOGY
TECHNICAL EDUCATION QUALITY IMPROVEMENT PROGRAMME(Phase-II)
Enhanced Interaction With Industry Initiatives
Exposing Students to New Technologies

(A) Name of Participant:	
(B) Name of the department:	Session:
(C) Details of Event:	
1. Title of event:	
2. Date of Event:	
3. Name of the program Coordinator(Designation/Contact information):	
4. Venue of the program(provide full Address/Contact information):	

5. Industry Sponsor:-

(D) Total budget for the program with Break ups:

Sl. No.	Particulars	Amount (Rs.)
1	Registration fee	
2	Travel charges	
3	Hotel accommodation	

Total Amount: Rs. _____

Application for leave duly submitted:

YES	NO
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(please
Tick)

Leave sanctioned From: _____ To _____

I, <Name of HOD> declare that Mr./Ms. _____, student of <Department> may be allowed to take part in " Name of the Event" from " Date" at " Venue"

Name/ Signature of
the HOD

UNDERTAKING

- | | |
|------|--|
| (i) | I, _____ declare that after the successful completion of the said program/Contest, I will submit a detailed report of the entire program, highlighting the unique experience gained during my participation. |
| (ii) | (ii) I shall submit the copy of all other details including certificate, original money receipt, bills of other sundry expenses within 3 days of joining college. |

Signature of the Applicant

TEQIP- Coordinator	Nodal Officer Finance	TEQIP-Chairman	BOG- Chairman