

**Pre-approval form  
(Conference/Workshop/Seminar)**

To,  
The Dean of FOM+C  
Manipal University Jaipur  
Through: Conference Coordinator

| S. No. | Application for support to attend Seminar/Conference/Workshop/ Short term course  |   |
|--------|---|---|
| 1      | Name with Employee code   | MUJ0597, Dr. Amit Jain  |
| 2      | Designation:<br>Department:<br>Date of Joining<br>Contact number ( Ext. & Cell ) and Email-id   | Professor TSB + Director SHM<br>FOM+C<br>NOV 21, 2015<br>8003599908   |
| 3      | Name of the Event & its website address ( if any)   | CERE-2018   |
| 4      | Place and date of the event : if applicable   | IIM INDORE 3/5/18 - 6/5/18  |
| 5      | Organizers of the event: If applicable<br>Nature of the event:  | International/ National/Regional<br><input checked="" type="checkbox"/> International                         |
| 6      | Financial liability of MUJ, if any  | Yes/No Registration 4000 + Travel 16000/-<br>Lodging + Laundry  |
| 7      | Whether chairing a session?<br>Whether presenting a paper? If yes, please mention<br>Whether you are the first author. ( Attach a copy of your abstract/paper and email soft copy to CSC satyaprakash.gupta@jaipur.manipal.edu) | Yes/No<br>Yes/No<br>ATTACHED COPIES -><br>1) ACCEPTANCE MAIL<br>2) CERE 2018 BROCHURE<br>3) ABSTRACT OF PAPER |
| 8      | Justify the necessity/relevance for attending the event w.r.t. your research area or the subject you teach.   | CONFERENCE ON RESEARCH & EDUCATION  |
| 9      | Give a list of all the conferences and /or workshops attended by you in this financial year. ( Attach a separate sheet, if required)  | NO (NIL).   |
| 10     | No. of SPCL required to attend this event:<br>No. of SPCL availed so far:   | 3 Days.   |
| 11     | How are you going to manage your classes and other responsibilities during your absence from MUJ?<br>( Get signatures)  | NO CLASSES SCHEDULED.   |
| 12     | Do you agree to submit one page report on the Proceedings of the event attended, to the University?   | Yes/No  |
| 13     | Signature of the applicant  | <i>[Signature]</i> 01/04/2018   |
| 14     | Recommendation of the HoD   | NA  |
| 15     | Comments of Coordinator   | Conference at IIM Indore<br><i>[Signature]</i> 20/4/18<br>Received on 20/4/18                                 |
| 16     | Recommendation of the Director  | NA<br><i>[Signature]</i> Director SHM   |
| 17     | Approval of the Dean of Faculty   | <i>[Signature]</i>  |

To CCS for record purpose and onward submission along with Post-Event Form (duly filled in) to Finance.

Forwarded to Registrar

*[Signature]*  
27/5/18

Registrar APPROVED  
*[Signature]*  
18/05/2018

