



INDIAN COUNCIL OF PHILOSOPHICAL RESEARCH
Darshan Bhawan, 36, Tughlakabad Institutional Area
M.B Road, New Delhi-110062

APPLICATION FOR FINANCIAL ASSISTANCE FOR ORGANIZING ACADEMIC PROGRAM FOR
CELEBRATING INDIAN PHILOSOPHER'S DAY (भारतीय दार्शनिक दिवस)

(Please, Prefer to Type-set Filled-in Data in the Format.)

[A]

1. Name and Designation of the Applicant:

(a) Gender : Male / Female: (b) Category: Gen SC ST OBC

3. Official Address of the Applicant (Organizer)

4. Applicant's Telephone/Mobile No.: ; **E-mail ID:**

5. Name & Address of the Applicant's Organizing Department & University:

(Mention SAME, if the address is not different from that given in column '3' above.)

6. (a) Whether the World Philosophy Day/Periodical Lecture Programme was organized by the Same Dept., of the Same Univ., in Last Year?:

(b) If so, whether the matters of Accounts were Settled or still Pending?

7. Name and designations of the Invited/Proposed / Speakers or Resource persons and Title of Their Proposed Presentations: (Provide in separate page, if space is insufficient. Provide the Theme of Presentations in Detail in Separate Pages.)

(1)

(2)

(3)

(4)

8. Dates of the Programme in Order of Preference:

(1): (2): (3): (4):

9. Number of Students of the Organizing Department

(a) U.G.: ; (b) P.G.: ; (b) M. Phil: ; Ph. D :

[B]

Details of the Budget Proposal for The Programme

(I) 1. Estimate of Proposed Expenditure under Different Heads (extra lines may be added):

- (a) _____ Rs.
(b) _____ Rs.
(c) _____ Rs.
(d) _____ Rs.
(e) _____ Rs.

2. Total Amount Required for organizing the Programme Rs. _____

(II) Amount of financial help from other sources, like the Concerned Department/University/Voluntary Organizations/Business Houses/ Individuals, etc., apart from ICPR Grant: Rs. _____

[C]

Payee's Email id: _____ and Mobile No.: _____

Kindly provide the Bank details in Bank Authorization Format, without which amount cannot be released.

[D]

UNDERTAKING

1. I certify that above information are correct to best of my knowledge and belief.
2. The sanctioned amount will be utilized for the purpose and within the period for which it is sanctioned.
3. **Immediately, after the completion of the event, Soft copy of detailed reports and photographs will be sent to ICPR by Email attachment to seminar.icpr@gmail.com.** The statement of expenditure along with original Vouchers, completed in all respects, will be submitted to the Council within two months of the actual event/programme with detailed reports and photographs of the event.
4. Other Terms and Conditions laid down by the Council and stated in Sanction Order, will be complied.

Signature of the Applicant (Organizer)

5. Forwarding Authority:

Dean/Director/Registrar
(Signature and Seal)

H.O.D, Dept. of _____
(Signature with Seal)

BANK AUTHORISATION LETTER

(/WE _____)

Organization /Society/ NGOs name/Institution/College/University's name) would like to receive the sums disbursed by the Indian Council of Philosophical Research, New Delhi to me/us electronically to our bank account: detailed below:

Payee's Particulars	
Address	
District	
Pin code	
I.T. Permanent Account Number	
Telephone number with STD code	
Fax No. if any	
Bank Details	
Name of the Bank	
Bank Branch(full address& Telephone number)	
Bank Account Number	
Account type	
Mode of electronic transfer available – RTGS, NIFD any other	
IFSC code	
MICR code	

Account number and IFSC/MICR codes have been verified by me and are correctly recorded above

SD*

Manager

(Bank branch maintaining the Account)

Seal

*(to be signed by the Manager of the Bank)

Signature

Name _____

Name of Organization _____

Registration No _____

Authority & Place of Registration

Date of Registration