



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 WORLD PHILOSOPHY DAY

[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. 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)

7. 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. _____

I hereby certify that the above information provided above are true to the best of my knowledge and belief.

Signature of the Applicant (Organizer)

Forwarding Authority

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

Dean/Director/Registrar
(Signature and Seal)

Important Note:

- (1) Incomplete Application form not routed through proper channel is liable to be rejected.
- (2) Personal email id is a must for applicant to receive the communication.
- (3) Account details (of College/Institutions only, not personal) must be attached and submitted in Bank Authorization Form i.e. in prescribed format available at ICPR website download section for transfer of fund.

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