



# भारतीय दार्शनिक अनुसंधान परिषद्

(भारत सरकार, मानव संसाधन विकास मंत्रालय)

INDIAN COUNCIL OF PHILOSOPHICAL RESEARCH

(Government of India, Ministry of Human Resource Development)

प्रो० रजनीश कुमार शुक्ल

सदस्य-सचिव

**Prof. Rajaneesh Kumar Shukla**

Member-Secretary

F.No.12-12/2017-18/P&R/ICPR

March 12, 2018

Sir/Madam,

Indian Council of Philosophical Research invites application for **Indian Philosopher's Day** (भारतीय दार्शनिक दिवस) to be commemorated and celebrated on the Adi Shankara Jayanti (Vaishakha Shukla Panchami) from the department of university or such Educational Institute/Organizations to hold some academic events, like seminars/workshops/Colloquiums/one – day Meet etc., in Philosophy at the Regional/Local level, the application should be routed through the Registrar/Dean/Director of the institute. The sanctioned amount shall be released through the Registrar/Dean /Director. No individual application will be entertained by the council.

To commemorate and celebrate the event, one of the following themes may be selected:

1. Indian Philosophy
2. Indian Ethics and Moral Philosophy
3. Indian Value System
4. Indian Logic and Epistemology

The selected Universities will be provided a grant up to Rs. 20,000/- for conducting this event. The faculty and students of neighbouring universities and institutions may be invited without exceeding the budget of ICPR. Additional budget, if required may be arranged from the host institute or other sources.

Statement of account of the entire expenditure supported by original bills/Vouchers, Script of papers, Photographs and Reports on the programme are to be submitted to the Council within one month of the completion of the programme to [seminar.report@icpr.in](mailto:seminar.report@icpr.in) for uploading on ICPR website.

The Council reserve the rights to select/reject any application as deemed fit.

Application in the prescribed format and Bank Authorization Form is available in the website of ICPR, New Delhi ([www.icpr.in](http://www.icpr.in)) may be submitted to the council by 26 March 2018.

Preference shall be given to those places which have not been sanctioned *World Philosophy Day/Periodical Lecture grants* in current financial year.

Last date for submission of complete filled in application through proper channel is March 26, 2018 to the address Member Secretary, Indian Council of Philosophical Research, 36, Tughlakabad Institutional Area (near Batra Hospital), New Delhi-110062.

(Rajaneesh Kumar Shukla)

E-mail: [rks.ms@icpr.in](mailto:rks.ms@icpr.in), [rksphilosophy@gmail.com](mailto:rksphilosophy@gmail.com), Website: <http://www.icpr.in>

मुख्य कार्यालय : दर्शन भवन, 36 तुगलकाबाद इन्स्टिट्यूशनल एरिया, महारौली बंदरपुर रोड, नई दिल्ली - 110062 दूरभाष : 29901516, 29901527, टेलिफैक्स : 29964751

**Head office:** Darshan Bhawan, 36, Tughlakabad Institutional Area, M.B. Road, New Delhi-110062 Tel.: 29901516, 29901527, Telefax: 29964750

लखनऊ कार्यालय : 3/9, विपुल खण्ड, गोमती नगर, लखनऊ - 226010 टेलिफैक्स : +91-522-2392636 E-mail: [centre@icpr.in](mailto:centre@icpr.in), [icprkw@gmail.com](mailto:icprkw@gmail.com)

**Lucknow Office :** 3/9, Vipul Khand, Gomti Nagar, Lucknow-226010 Telefax: +91-522-2392636 E-mail: [centre@icpr.in](mailto:centre@icpr.in), [icprkw@gmail.com](mailto:icprkw@gmail.com)



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

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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:

<b>Payee's Particulars</b>	
Address	
District	
Pin code	
I.T. Permanent Account Number	
Telephone number with STD code	
Fax No. if any	
<b>Bank Details</b>	
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