

Application for Visiting Scholar

<u>A. Category</u>	
<input type="checkbox"/> Visiting Professor	Appoint as InRC Affiliate <input type="checkbox"/>
<input type="checkbox"/> Visiting Scholar	

<u>B. Applicant Details</u>	
Full Name:	
Current Position:	
Contact Numbers:	
E-mail:	
Department and Faculty:	

<u>C. Nominee Details</u>	
Full Name:	
Area of Interest:	
Nationality:	
Highest Academic Qualification:	
Home Institution:	

<u>D. Project Details</u> (Please attach detailed project proposal including the impact to the Faculty/UoP)	
Project Title:	
Time Period for Project:	

<u>E. Budgetary Requirement</u>	
Air Ticket:	
Accommodation:	
Other(Please Specify):	
Total:	

*Local transport will have to be obtained from the respective Faculty

Signature of Applicant:

Date:

F. Recommendation/Note of the Head of the Department	
Name & Designation :	
Signature :	
Date :	

G. Recommendation from Faculty Board	
Name & Designation :	
Signature :	
Date :	

H. Recommendation/Note of the Dean	
Name & Designation :	
Signature :	
Date :	

I. Approval of the InRC Board	
Amount:	
Signature :	
Date :	

For Office Use only

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