PERMISSION FOR CONDUCTING ADD-ON COURSES

NOTE: 1.Please identify and finalize the resource persons and the room, if required, before getting the permission letter signed.

2. A copy of this duly filled in form signed by the Principal and Convener and be submitted to ICT and/or Caretaker for necessary action.

3. Please ensure that the completion certificate of the course is physically signed by theConvener and Principal after the course report is made.

EVENT DETAILS

1. Name of the Department/s conducting the course: …………………………………………

2. Name of the TIC and/or Convenor: Prof./Dr./Mr./Ms…………………………………………

3. Proposed Title of the Add-On Course: ………………………………………………………

4. Mode of conduct of Course (Offline/Online/Hybrid):…………………………………….

5. Collaborating Agency /Organization (If any): …………………………………………….

6. Duration of the Course: from………………… to……………………..

7. Total number of teaching hours:……………………………….

8. Time and Days of the Slot: …………………………………………………………………………

9. Total number of seats…………………………………

10. Fees of the Add-on Course being charged from students (Please specify amount): ……………

11. Proposed Budget (please attach details in a separate enclosure): …………………………….

12. Faculty responsible for Geo Tagged Pictures …………………………………………………..

13. Faculty responsible for Course Report   …………………………………………………..

14. Faculty responsible for accounts submission:…………………………………………………

10. ICT support required, if any (ICT Lab, Laptop, LCD projector)

11. Caretaker support required (tables, chairs, public addressing system, sanitation,

    manpowerassistance)

12. Room requirement (Seminar Hall/ Ground/others) ………………………………………

Add-on Course Coordinator   Principal

(Date:)   (Date:)

Proposed List of the speakers along with their affiliation:

1)

2)

3)

4)

5)

6)

7)

8)

9)

10)