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**DIVISION OF INTERNATIONAL HEALTH AND HUMAN RESOURCE DEVELOPMENT (IH&HRD)**

**APPLICATION FORMAT FOR INTERNATIONAL TRAVEL GRANT SUPPORT TO NON-ICMR SCIENTISTS**

**Important:**

1. Applications should be submitted two months prior to the date of the Conferences/Seminars/ Symposia/Workshops.
2. Age will be considered as on the date of the Conferences/Seminars/ Symposia/Workshops.
3. Separate application should be submitted for different International Conferences/Seminars/ Symposia/Workshops.
4. Information asked in point no. 8 must be filled appropriately.
5. **Application/Translation of knowledge generated during research implementation for benefit of human beings should be specified in Abstract.**
6. **Incomplete and late applications will be rejected.**

**NOTE: COMMITMENT FOR FUNDING MAY BE WITHDRAWN IF ANY OF THE INFORMATION FURNISHED BY THE APPLICANT IS FOUND TO BE FALSE AND MAY DEBAR THE CANDIDATE FOR FUTURE FINANCIAL SUPPORT UNDER THIS SCHEME**

1. Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#  Name of the Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address of University/Institution/College with PIN code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Tel. No. With STD Code (O): Mobile no.: Email ID:

 Postal address with pincode:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Age (as on date of the Conference): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_\_\_\_\_\_\_\_

 Date of birth (DD/MM/YYYY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name of the International Conference/Seminar/Symposium/Workshop/

Training Programmefor scientists/nurses/paramedical: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.1 Organizers details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.2 Title of Abstract accepted/Paper: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Venue and date of Conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.1. Whether Conference is held annually/once in two years/ once in three years (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.2. Broad area of the Conference (pl. tick appropriate):

 a) Life Sciences

 b) Communicable Diseases

 c) Non-Communicable Diseases

 d) Basic Medical Sciences

 e) Reproductive Health

 f) Nutrition

 g) Any other (please specify)

5. Purpose of visit (pl. tick appropriate):

 5.1. Presenting Paper Oral/Poster

 5.2 No. of Papers Single author/One of the authors (First/Corresponding)

 5.3 Chairing a Session Yes/No

 5.4 Keynote Speaker Yes/No

 5.5 Others (Please specify)

6. Particulars of financial assistance the applicant is applying for/receiving from other National sources/Organizers, towards travel for attending of Conference:

6.1 Name of the funding agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.2 Sanctioned/committed amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Total Fare from the airline indicating the cost of return air fare (Excursion/ Economy class) as per the DoE OM no. 19024/03/2021/E.IV dated 16.02.2022: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.1 VISA fee (in Rs.): (in numerals) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

 (in words) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.2 Registration fee (in Rs.) provided to young scientists: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (in Foreign currency): \_\_\_\_\_\_\_\_\_\_

8. Details of International Conferences attended in the last three years, if any [Title of the Conference, dates, venue & amount (in Rs.) funded by ICMR]:

9. Are the findings in the research paper being presented the result of an ICMR project or other work: Yes/No.

 If yes, then:

 (a) ICMR Project’s reference number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(c) Duration of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name, Designation and affiliation of Principal Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Status: Ongoing/Completed

10. Name, designation and complete address of authorized Officers *viz.* Registrar/Finance Officer of the host institute for receiving financial grant:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Proposed date of leaving India for the Conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Likely date of return to India: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Indicate clearly, the benefit expected to be derived by attending the Conference (attach separate sheet in 100 words only)

1. **Emphasis will be given to the Abstracts with ‘significance in terms of biomedical research human health’**
2. **Certified that the present Abstract is original and it has not been published/presented earlier.**

13. Any other information which you may like to furnish in support of your application:

**UNDERTAKING**

I hereby declare that the information furnished by me as in above is correct and I have not availed International travel grant support from ICMR in the last three years for this purpose.

**Date: Signature of applicant**

**Place:**

**Recommendation of the Head of the Department and Institute**

 **Signature & Official Seal of Host Institute Competent Authority**

**FOR APPLICANTS REFERENCE:**

**PLEASE ENCLOSE SUPPORTING DOCUMENTS** wherever in the check list the applicant’s answer is Yes (strike off whatever is not applicable).

All the Documents may be enclosed as in the checklist order given below:

**CHECK LIST**

1. Applicant has Paper(s) accepted at the Conference Yes/No

2. Applicant has been sanctioned any travel support by any other agency Yes/No

3. Fare from the airline indicating the cost of return excursion/airfare

 (Economy class) as per the DoE OM no. 19024/03/2021/E.IV

 dated 16.02.2022 Yes/No

4. Certificate in proof of date of birth Yes/No

5. Copy of Abstract of Paper(s) Yes/No

6. Brochure/Announcement of the Conference Yes/No

7. Technical programme of the Conference Yes/No

8. Applicant has availed assistance in last three years Yes/No

9. Applicant is a young scientist (35 years as on date of conference) Yes/No

11. Documents are properly tagged and flagged with the application Yes/No

12. Updated biodata with publications in last five years (**indexed journals** in Yes/No

 databases like PubMed, SCI & SCIE *etc*. publications in predatory journals

 to be avoided)

13. Copy of Visa fee (receipt) Yes/No

14. Copy of Registration fee paid to be sent by ONLY selected applicants Yes/No

15. Brief CV of the Applicant should be one page Yes/No