

MALABAR CANCER CENTRE

(an autonomous centre under Govt. of Kerala)

Thalassery, Kannur, Kerala PIN 670 103

REQUEST FOR ATTENDING CONFERENCE/SEMINAR

Name of Applicant	:				
Designation	:				
Department	;				
Probation status	: Completed/ On probation				
Conference/Seminar Detai	Els				
Name of Conference/Seminar	:				
Organized by	:				
Place of Conference/Seminar	:				
Date of Conference/Seminar	:				
Faculty/ Delegate	:				
Title of Presentation	:				
MCC IRB Number	:				
Paper/Poster	:				
Accepted/awaiting acceptance :					
No. of conferences attended in this academic year	:				
No. of duty leaves availed	:				
Permission from the Depar	rtment				
Signature of Colleague	:				
No of duty leaves recommended					
by HOD	:				
Permission from HOD	:				
Date of joining duty	:				
Expected expenditure deta	(Applicable only to those eligible for reimbursement)				
1. Registration fee:					

2. Travel expense (to and	fro):				AC/RAC 1 ver 1 2019	
3. Expense for accommodation:4. Total expense:			(expense/day:)	
Date:			Signature of Appl	licant		
For Academic Council Office	use o	nly:				
Decision of AC	:	1) Approved	2) Rejected	3) To Resubmit	4) Others	
Duty leaves	:	1) Eligible	2) Not Eligible			
No.of duty leaves permitted	:					
Reimbursement	:	1) Eligible	2) Not Eligible			
Comments:						
Date:						
				Signature of Chairman,		
				AC-MCC		