Form for submitting Proposals for

☐ Sponsored  ☐ Conference  ☐ Short-Term Course  ☐ Workshop  ☐ Symposium  ☐ Seminar

1. Title: ________________________________________________________________

2. Name of the Organizer(s): ______________________________________________

3. Proposed Period(s): From: __________________ To: __________________________

4. Objective: __________________________________________________________________

5. Likely number of participants:

6. Financial Sources:
   i) Registration Fee: a) Non IITK Faculty _________ b) IITK Faculty _________
      (Course Fees + 18% GST) c) Non IITK Students _________ d) IITK Students _________
      e) Personnel from Industries/ R&D Organizations___________
   ii) Funding Agency (ies) ____________________________
   iii) Any other: __________________________________________

7. Number of rooms required in Visitors’ Hostel:

8. For Lecture Requirements:

   ☐ Class Rm. near CCE Office (capacity 45) __________ __________ __________
   ☐ Conf. Room. near CCE Office (capacity 30) __________ __________ __________
   ☐ Seminar Rm. (Small) in PBCEC (capacity 36) __________ __________ __________
   ☐ Conference Rm. in PBCEC (capacity 20) __________ __________ __________
   ☐ Seminar Rm. (Big) Main Hall in PBCEC (capacity 64) __________ __________
   ☐ I. I. T. Outreach Centre at Noida (Sector 62) __________ __________

9. I understand that overheads at 20% gross receipts is payable to CCE.
   (Signature of the Course/Workshop Coordinator with date)

Forwarded and Recommended

(Head of the Department)

10. Recommendation of the Head, CCE on the availability of rooms in VH
   (i). The required no. of ____ rooms are available and earmarked for the purpose
   (ii). There is only ____ no. of rooms available and the same are earmarked

   May please be approved

(Head, CCE)  APPROVED

DEPUTY DIRECTOR