Science and Technology Human Resource Development Project
Ministry of Education

COMPETITIVE RESEARCH GRANT

ADB
ASIAN DEVELOPMENT BANK

REQUEST FOR APPROVAL-FORM 2

International/Local conference (Participation/Presentation/Publication)

1. Project Implementation Unit	
2. Academic department	
3. CRG No. and Title of the project	
4. PCSS No.	
5. Name/Designation of the principal investigator	
6. Details of the conference **(Annexure 01)** (Please submit the details of the conference including the date, venue, duration and budget allocation, etc.)	Local ☐ International ☐ Physical ☐ Online ☐ (Please mark "x" in appropriate cages)
7. Details of the participants **(Annexure 02)** (Please submit the details of the participants including, Names, Designation, etc.)	
8. Total estimated cost **(Annexure 03)** a. Registration fee and other payments (Please submit details of the payments for the conference. If it is an international conference, please provide bank details for USD correspondent bank with swift code, etc.)	
b. Traveling and accommodation (If it is an international conference, please provide the details of the traveling and accommodation arrangement, quotations, etc.)	
9. Current disbursement status of the project **(Annexure 04)** (Please submit the summary of disbursement status as per the approved budget)	

10. Recommendation of the Head of the Department

Date: Head of the Department

11. Recommendation of the Deputy Project Director of STHRDP/PIU

Date: Deputy Project Director

12. Recommendation of the Dean of the Faculty

Date: Dean of the Faculty

13. Recommendation of the Vice Chancellor of the University

Date: Vice Chancellor

14. Approved / Recommended and forwarded to Director Planning - Higher Education

Date: Project Director – STHRDP
15. Additional Secretary (Development) - Higher Education Date: Director (Planning)
16. Secretary – Ministry of Education Date: Additional Secretary (Development)
15. Date: Secretary, Ministry of Education

Annexure 1 Details of the conference
Annexure 2 Details of the participants
Annexure 3 Total estimated cost
Annexure 4 Current disbursement status of the Project

STHRDP office use only

1. a. Copy of the publication/Participation Certificate received

……. ……
Date STHRDP

b. Leave approval letters received (if applicable)

……. ……
Date STHRDP

c. Air tickets and boarding pass received (if applicable)

……. ……
Date STHRDP

2. All payments have been made ……... …….
Voucher No. / Date Total expenditure

……
MA/Finance