



**NATIONAL INSTITUTE OF SCIENCE EDUCATION & RESEARCH
BHUBANESWAR**

PROPOSAL FOR INVITING FACULTY APPLICANT TO NISER

Name of the Proposer:	
Designation with PF No.	
School	<input type="checkbox"/> SBS <input type="checkbox"/> SCS <input type="checkbox"/> SMS <input type="checkbox"/> SPS
Name of the Invitee:	
Designation:	
Name of the Institution/University	
Purpose of visit:	<input type="checkbox"/> Seminar <input type="checkbox"/> Colloquium <input type="checkbox"/> Symposium <input type="checkbox"/> Workshop <input type="checkbox"/> Others
	If others specify:
	Topic:
Proposed Date/Period of visit	
Date & Time of Talk:	
Financial Support (if required)	
Travel (Please give details)	
Accommodation (Please mention)	
Honorarium (if any)	
Specific remarks (if any)	

Date:

Place: NISER, Bhubaneswar

Signature of the Proposer

RECOMMENDATION
Chairperson

Visit APPROVED / NOT APPROVED WITH / WITHOUT financial support from NISER

FI/C – FACULTY AFFAIRS