

(Formerly known as KLE University)
(Deemed-to-be-University established u/s 3 & 12B of the UGC Act, 1956)
Accredited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (Gol)

Number of teachers provided with financial support to attend conferences/workshops and towards membership fee of professional bodies

		Name of conference/ workshop attended for which financial support was provided	Amount
1.	Dr. Rajendra Basappa 66th Annual conference of Indian Uppin Orthopedic Association		11500.00
2.	Dr. Kumar Vinchurkar	Skill sets in surgical oncology	16000.00
3.	Dr. Harpreet Kour	Athlete health moving beyond injuries	16000.00
4.	Mr. Abhijit Dinesh Bhatkal	Redefining ethno pharmacology for the global health and wellbeing	8000.00
5.	Mrs. Akshata Shivaling Sangolli	National Conference on Impact of research development in life sciences	8000.00
6.	Mrs. Maya Shivanand Shet	National Conference on Impact of research development in life sciences	8000.00
7.	Mrs. Kalyani Killekar	National Conference on Impact of research development in life sciences	8000.00
8.	Dr Rachana Raghavendra Kulkarni	Society of Clinical Anatomists (SOCA)	16000.00
9.	Dr. Anilkumar S Harrgop	17th South Zone & 29th Aolk Conference Manipal	16000.00
10.	Dr. B.P. Belaldavar	17th South Zone & 29th Aolk Conference Manipal	16000.00
11.	Dr. Priti S Hajare	17th South Zone & 29th Aolk Conference Manipal	16000.00
12.	Dr. Laxmi Deshpande	26th Chapter Mahamecrocon at Pune	16000.00
13.	Dr. Rajesh R Havaldar	17th South Zone & 29th Aolk Conference Manipal	13434.00
14.	Dr. Jang Bahadur Prasad	IASP Northern Regional Conference at Kashmir	23900.00
15.	Dr. Madhumati Patil	13th National Conference of Health Professional Education Dehradun	32000.00



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16.	Dr. Vinita	17th South Zone & 29th Aolk Conference	24000.00
	Metgudmath	Manipal	24000.00
17.	Dr. Vinay Bannur	FORENSICON 2022 at KMC Manipal	16000.00
18. Dr. Manjunath		SAARC 2022 14th international Congress	16000.00
	Shivapujimath	of Anesthesiologists	10000.00
19.	Dr. Rajesh S mane	KISACON 2022 at Kalburgi	16000.00
20.	Dr. Rajesh R Mane	Asian Society of Pediatric Anesthesiology	30000.00
		held at Istanbul, Turkey	30000.00
21.	Dr. Harpreet Kour	International Sports & Exercise Nutrition	75000.00
		2022 held at UK	75000.00
22.	Dr. Somashekhar S	Kamlscon -2022, Collaborative Forensic	8000.00
	Pujar		0000.00
23.	Dr. Ravindra S	Kamlscon -2022, Collaborative Forensic	8000.00
	Honnungar		8000.00
24.	Dr. Sunita Y Patil	NCHPE-2022 National Conference of	16000.00
		Health Professions Education at Dehradun	10000.00
25.	Dr. Shivaswamy M S	NCHPE-2022 13th National Conference on	16000.00
		Health Professions Education at Dehradun	10000.00
26.	Dr. Manasi Gosavi	70th Annual National Conference at	8000.00
		Bangalore	0000.00
27.	Dr. Jang Bahadur	43rd Annual Conference of the IASP	9000.00
	Prasad	Vdaipur, Rajasthan	7000.00
28.	Dr. Manisha S More	69th Natcon & Global Congress of	8000.00
		Anatomists	0000.00
29.	Ms. Kashamma V	Public Health Aspects of Nutrition	8000.00
	Uppin		0000.00
30.	Dr. Prasanna S Jirli	Collaborative Forensics	8000.00
31.	Dr. Annapurna Kari	Climate Change: A Public Health Threat	16000.00
		Kochi, Kerala	10000.00
32.	Dr. Chaitanya Kamat	13th National Conference on Health	16000.00
		Professional Education to Dehradun	10000.00



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33.	Dr. Jang Bahadur	40th Annual National Conference of the		
	Prasad	ISMS to Karad from 24-23 Nov 2022	16000.00	
34.	Dr. Sunita Y Patil	APCON-22 National Conference of M.S		
		Ramaiah Med College, Bengaluru	8000.00	
35.	Dr. Bhagyashri R	13th National Conference on Health	4.6000.00	
	Hungund	Professional Education to Dehradun	16000.00	
36.	Dr.Deepti Kadeangadi	13th National Conference on Health	1.6000.00	
		Professional Education to Dehradun	16000.00	
37.	Dr. Abhilasha	PHOCON 2022	1,6000,00	
	Sampagar		16000.00	
38.	Dr. V.A.Kothiwale	78TH Annual conference of Association of	1,000,00	
		Physicians of India	16000.00	
39.	Dr. Prashant Annappa	24th Indian Prosthodontics Society PG	000000	
	Karani	Convention	8000.00	
40.	Dr. Abhijit	24th Indian Prosthodontics Society PG	000000	
	Parasharam Patil	Convention	8000.00	
41.	Dr. Mallikarjun	24th Indian Prosthodontics Society PG		
	Hanamantap	Convention	8000.00	
	Daddamani			
42.	Dr. Mahantesh	24th Indian Prosthodontics Society PG	000000	
	Sadanand Bembalgi	Convention	8000.00	
43.	Dr. Anandkumar	24th Indian Prosthodontics Society PG	0000000	
	Goudappagouda Patil	Convention	8000.00	
44.	Dr. Veena B Benakatti	24th Indian Prosthodontics Society PG	000000	
	Basappa	Convention	8000.00	
45.	Dr. Aditya	24th Indian Prosthodontic Society PG	9000 00	
	Ramnarayan Acharya	Convention	8000.00	
46.	Dr. Swapnil Bhujabali	24th Indian Prosthodontic Society PG	000000	
	Shankargouda	Convention	8000.00	
47.	Dr. Sayed Mohammed	24th Indian Prosthodontics Society PG	0000000	
	M Killedar	Convention	8000.00	
48.	Dr. Aditya Acharya	8th IPS, KARNATAKA State Conference	5900.00	



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49.	Dr. Abhijit	8th IPS, KARNATAKA State Conference	5900.00
	Parasharam Patil		3700.00
50.	Dr. Ramesh P	24th Indian Prosthodontics Society PG	8000.00
	Nayakar	Convention	8000.00
51.	Dr. Sagar Jalihal	26th National Conference of Indian	16000.00
		Association of Public Health Dentistry	10000.00
52.	Dr. Roopali	26th National Conference of Indian	16000.00
	Sankeshwari	Association of Public Health Dentistry	10000.00
53.	Dr. Vaishali K	IAOMR National PG Convention 2022	16000.00
	Keluskar		10000.00
54.	Dr. Anjana Bagewadi	IAOMR National PG Convention 2022	16000.00
55.	Dr. Chetan Belaldavar	29th National Conference of IAOMP	16000.00
56.	Dr. Sidramesh Muttagi	46th Annual Conference of AOMSI 2022	16000.00
57.	Dr. Vidyavathi H Patil	43rd National ISPPD Conference	16000.00
58.	Dr. Niraj Gokhale	43rd National ISPPD Conference	16000.00
59.	Dr. Shivayogi M	43rd National ISPPD Conference	16000.00
	Hugar		10000.00
60.	Dr.Deepa Mane	29th National Conference of IAOMP	16000.00
61.	Dr.Vishwanth S	9th World Ayurveda Congress and Arogya	8000.00
	Wasedar	Expo	8000.00
62.	Dr.P.G.Jadar	9th World Ayurveda Congress and Arogya	8000.00
		Expo	8000.00
63.	Dr.Deepti B Bagewadi	Indian Academy of Fitness Training	8000.00
64.	Mrs. Sneha	9th International Congress of Society for	
	Basangouda patil	Ethnopharmacology India Redefining	8000.00
		Ethnopharmacology for the Global and	0000.00
		Wellbeing	
65.	Dr. Sanjay Rayagouda	9th International Congress of Society for	
	Ugare	Ethnopharmacology India Redefining	6820.00
		Ethnopharmacology for the Global and	0020.00
		Wellbeing	



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66.	Dr. Pramod J	12th International IASTAM Oration and	
	Hurkadale	Award Conclave 2022	16000.00
67.	Mr. Namit	44th All India cell biology conference &	
	Kudatarkar	international symposium on molecular &	16000.00
		cellular insights of human diseases	
68.	Mrs. Aishwarya C	25th Annual National Convention of	
	Hiremath	Association of Pharmaceutical Teachers of	8000.00
		India Mysore	
69.	Dr. Pramod Hurakadle	Translational Research under Medicinal	
		Plants	16000.00
70.	Dr. Mahesh S Palled	International Conference on Drug	
		Discovery	8000.00
71.	Ms. Rohini S	International Conference on Drug	
	Kavalapure	Discovery	16000.00
72.	Dr. Preeti Salve	International Conference on Drug	1,6000.00
		Discovery	16000.00
73.	Mr. Kiran N Gaikwad	International Conference on Drug	8000.00
		Discovery	8000.00
74.	Dr.Shankar Alegaon	International Conference on Drug	9000 00
		Discovery	8000.00
75.	Mr.Sanjay Ugare	7th Annual International Conference on IPR	8000.00
76.	Mr. Sujay Hulylakar	72nd India Pharmaceutical Congress,	
		Nagpur Access to Quality & Affordable	16000.00
		Medical Products to 20th-22th Jan -2023	
77.	Dr.Bhaskar Kurangi	72nd India Pharmaceutical Congress,	
		Nagpur Access to Quality & Affordable	16000.00
		Medical Products	
'8.	Dr. Pramod Hurkadale	72nd India Pharmaceutical Congress,	
		Nagpur Access to Quality & Affordable	16000.00
		Medical Products to 20th-22th Jan -2023	
9.	Dr. Pradeep Kumar M	6th International Conference on	6340.00
	R	Pharmaceutical R&D & Bio pharmaceutics	6340.00



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80.	Ms. Sushmita I	Workshop on work place environment and	450
	Hiremath	mental health	
81.	Mrs. P S Akki	Workshop on startups and innovations in	390
		health care	
82.	Mr. Harish K H	Workshop on Best practice of OBE its	500
0.0		implementation and success	
83.	Mr. S B Patil	Workshop on Best practice of OBE its	500
		implementation and success	
84.	Dr. S B Nyamagouda	Workshop on Best practice of OBE its	500
		implementation and success	
85.	Dr. Ravindra V Karadi	Startup Dialogue	3000
86.	Ms. Sushmita I	Workshop on Molecular Biology of	450
	Hiremath	infectious disease	
87.	Ms. Sushmita I	Workshop on Be an effective presentation	450
	Hiremath	skill enhancement	
88.	Dr. Jaysheela S	4th National Pharm D. Colloquium	1900
	Hiremath		
89.	Dr. Nisthul Stanyl	4th National Pharm D. Colloquium	1900
90.	Dr. Bhavaya D B	4th National Pharm D. Colloquium	1900
91.	Dr. Abhishek B J	4th National Pharm D. Colloquium	1900
92.	Ms. Neha M Mali	Workshop on From research to Publication:	625
		What Researcher Should Know	
93.	Ms. S I Hiremath	Workshop on From research to Publication:	625
		What Researcher Should Know	
94.	Ms. Prabhu Shreya	workshop on Formulation & Optimization	825
	Ajay	of Self Emulsifying Drug delivery System	
95.	Mrs. P S Akki	workshop on Formulation & Optimization	825
		of Self Emulsifying Drug delivery System	
6.	Ms. Pooja Koganole	Workshop on Basic Principles of Cell	2050
		Culture Techniques	
7.	Ms. Sushmita I	Workshop on Basic Principles of Cell	2050
	YTT	Culture Techniques	



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98.	Ms. Neha M Mali	Workshop on Basic Principles of Cell	2050
		Culture Techniques	
99.	Ms. A S Menasinakai	Workshop on Basic Principles of Cell	2050
		Culture Techniques	
100.	Mr. Harish K H	Workshop on Basic Principles of Cell	2050
		Culture Techniques	
101.	Dr. Subhas Karki	International Conference on Drug	16000.00
		Discovery	10000.00
102.	Mrs. Dimple pirgal	Pharmaceutical industry- Academia	900
		conclave	900
103.	Dr. Lakshmi Gayathri	Pharmaceutical industry- Academia	790
		conclave	790
104.	Dr. Hariprasad	25th APTICON 2022	3736
105.	Dr. Bhagya V. Rao	National Conference on "New Horizons for	
		Drug discovery and Innovation in Health	945
		care and Pharmaceutical Research"	
106.	Dr. Sanjiv Kumar	IAP Conference	16000.00
107.	Dr. Deepa Metgud	6th Annual Conference of Society of Indian	16000.00
		Physiotherapists	
108.	Dr. Anand	6th Annual Conference of Society of Indian	16000.00
	Heggannavar	Physiotherapists	
109.	Dr. Vinuta Deshpande	6th Annual Conference of Society of Indian	16000.00
		Physiotherapists	
110.	Dr. Shukra chivate	6th Annual Conference of Society of Indian	16000.00
		Physiotherapists	
111.	Dr. Raju Gadad	6th Annual Conference of Society of Indian	2475.00
		Physiotherapists	
112.	Dr. Jeba Chitra	6th Annual Conference of Society of Indian	16000.00
		Physiotherapists	
113.	Dr. Snehal Dharmayat	6th Annual Conference of Society of Indian	16000.00
		Physiotherapists	



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114.	Dr. Anil Muragod	10th Anniversary International Conference	8000.00
		of Geriatric Orthopedic Society of India	
		GOSICON 2022	
115.	Dr. Pamela D'silva	International conference on Swasthavritta	3000.00
		and Yoga, Swasthayu 2K22	
116.	Dr.Snehal Dharmayat	8th International Symposium on ICF	16000.00
		Education	
117.	Dr.Prashant Naik	8th International Symposium on ICF	16000.00
		Education	
118.	Dr.Peeyoosha	International conference on Swasthavritta	3000.00
	Gurudutt	and Yoga, Swasthayu 2K22	
119.	Dr. Sanjiv Kumar	International Conference of Physical	16000.00
		Therapy	
120.	Dr. Basavaraj	1st International Osteopathy & Manual	16000.00
	Motimath	Therapy Conference	
121.	Dr. Dhaval Chivate	1st International Osteopathy & Manual	16000.00
		Therapy Conference	
122.	Mr. Jagadeesh H	International Conference on Emerging	5900.00
		Competencies in Midwifery & Neonatal	
		Practices the Nursing perspective	
123.	Mr. Umesh	International Conference on Emerging	5900.00
	Nandagaon	Competencies in Midwifery & Neonatal	
		Practices the Nursing perspective	
124.	Mrs. Nirmala Dsouza	International Conference on Emerging	5900.00
		Competencies in Midwifery & Neonatal	
		Practices the Nursing perspective	
125.	Dr. Supriya J Kulkarni	National Seminar Nexus 2022	12559.00
126.	Dr. Nagaraja Havalada	National Seminar Nexus 2022	13849.00
127.	Dr.Supriya Kulkarni	XIII National Conference on Health	5000.00
		Professions Education	
128.	Dr. Rinku Porwal	XIII National Conference on Health	16000.00
		Professions Education	



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129.	Dr. Neha Kulkarni	Swaninarayan University's Himalayan Institute of Medical Sciences, Dehradun,	16000.00
		Uttarakhand	
130.	Dr. Ranjana Ranade	APCON-2022	18000.00
131.	Dr. Prajna KS	APCON-2022	18000.00
132.	Dr. Manisha Chougale	Global Congress of Anatomists	4056.00
133.	Dr. Chitra BR	Global Congress of Anatomists	5056.00
134.	Dr. Drakshayini Kakati	Global Congress of Anatomists	4056.00
135.	Dr. Supriya Novel Tony	Global Congress of Anatomists	4056.00

Prof. (Dr.) M.S. Ganachari Registrar Registrar

KLE Academy of Higher Education and Research, BELAGAVI

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/in	dex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	UTIONS.COM/FIN_ASSIST/INDE	EX.PHP/CORE/ASS_LIST)	
Einal Approved List (https://flixirsolutions.com/fin_assist/in	A. To be filled by the faculty dex.php/Core/claimed_report)	member:	3. Qualification	4 Decimation	
Ma Licer Macter		DR.RAJENDRA BASAPI	MS ORTHO	4. Designation Teaching Staff	
(https://flixirsolutions.com/fin_assist/in				reaching Stall	
Bank Details (https://flixirsolutions.com/fin_assist/in	5. Department dex php/வொளிக்காk Details)	6. Institution J N Medical College	7. Email Id uppinrajendra@rediffmai	8. Date of joining the Institution	
© Change Password (https://flixirsolutions.com/fin assist/in	dex.php/Core/changepass)			01-08-1985	1
(https://flixirsolutions.com/fin_assist/in-	B. Particulars and assignme	nt in the conference:			
(https://flixirsolutions.com/fin_assist/in	dex.php/Spraleds/of tegoot)nfer Symposium	rence / Seminar /	View File (https://flixirsolutions.com/fir	assist/uploads/1619b775	<u>3</u>
	ATTENDING INDIAN ORTHO	OPAEDICS NATIONAL CON	da3fa_uppin sir letter.docx)		
	2. Benefits to be derived fr	•	Please enclose a separate		
		minar 7 dymposium	Choose File No file chose	n	
	3.Assignment in the afores / Symposium	said Conference / Seminar	a) Delivering key-note address/orations/plenar	y lectures	
			b) Contributing the scie	ntific paper	
			c) Chairing a scientific s	session	
	T3 01 -	3500/-	d) International collabor exchange program(only		
	300	3500/	e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	to discuss	
			f) Others. if any. specify		
	C.Particulars of the conference being attended	(YES >)			
	a) Title of the Conference / Seminar / Symposium	66th ANNUAL CONFE	b) Date of conduct	21-12-2021	
	c) Venue	DR.SHYAMA PRASAI	d) Financial support extended by the University	16000 21-12-2021	
	e. Quantum of financial	grant			
	eligible				
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	7	
	f) Copy of the sanction letter to be enclosed	View File (https://flixirsolutions.c om/fin_assist/uploads/ 1619b7753da507_Upp in sir letter copy.docx)			
	Note : The faculty member is Conference in a calendar year		t to attend one State / Zonal	and one National	
	D.Particulars of the organize	rs of the aforesaid Conferen	ce / Seminar / Symposium		
	a) Name of the Organizer	DR RAM CHADHA	b) Title of the program	INDIAN ORTHOPAEL	
	c) Place	GOA	d) Duration	(5 V)	

a) Place	GOA				
b) Mode of Journey	By Road	V		2	
Amount in Rs					
c) Fare	0.00	d) To and For e	exp.	500.00	
e) Registration /	8500.00	f) Accommoda	tion	7000.00	
Delegation Fee	0000,00	charges	LIOI1	7000.00	
g) Other charges	0.00	Total Expenses	\$	16000.00	
F. Documents to be submitt	ed:				
a) Copy of the letter of invit	ation from the organizers.	<u>View File</u> (https://flixirsolution da67c_Uppin sir le			9b7
b) Copy of the full text of do prepared by the applicant for		<u>View File</u> (https://flixirsolutior da7eb_UPPIN SIR			9b7
	DE	CLARATION			
 I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atte 	nference, lls / receipts along-with Atte ending the aforesaid Confel	ndance / Participation Ce	ertificate wit	hin fifteen days to t	the
 I am not getting any financial for attending the aforesaid Co I shall produce necessary bil 	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenternce.	ertificate wit	hin fifteen days to t	the
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I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atters and experience gained from a I shall reimburse the amount.	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty me ttending the aforesaid Confei to the University in excess and conditions	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenference. of the eligibility Date:	ertificate wit	hin fifteen days to to	the
I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atters and experience gained from a I shall reimburse the amount.	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess and conditions Conf	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenference. of the eligibility Date:	ertificate with the control of the c	hin fifteen days to t	the wled subr
I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atte I shall conduct a seminar for and experience gained from a I shall reimburse the amount Accept terms a	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess and conditions Conf	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenference. of the eligibility Date:	Dr. Veerappa Dr.	comment Approved. Kindly all original bills an certificates Approved	the wled
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I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atte I shall conduct a seminar for and experience gained from a I shall reimburse the amount Accept terms a	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess and conditions Con Name	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenterence. of the eligibility Date: nments	Dr. Veerappa Dr. Veerappa	comment Approved. Kindly all original bills an certificates Approved	subi
I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atte I shall conduct a seminar for and experience gained from a I shall reimburse the amount Accept terms a To The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith the presentation scientific paper (p	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess and conditions Con Name	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenterence. of the eligibility Date: nments	Dr. Veerappa Ormat for gree Conferen	comment Approved. Kindly all original bills an certificates Approved	subi
I am not getting any financial for attending the aforesaid Co I shall produce necessary bil University from the date of atte I shall conduct a seminar for and experience gained from a I shall reimburse the amount Accept terms a To The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith the presentation scientific paper (p. Thanking you,	nference, Ils / receipts along-with Atte ending the aforesaid Confei the benefit of the faculty mittending the aforesaid Confei to the University in excess and conditions Con Name	the sponsorers of the Corndance / Participation Cerence, embers of the Departmenternce. of the eligibility Date: nments	Dr. Veerappa Dr, Veerappa Or, Veerappa	comment Approved. Kindly all original bills an certificates Approved	subi

e) Date of conference

21-12-2021

f) Financial grant

16000

velcome finance

- Application
- Final Approved List
- User Master
- Bank Details
- Change Password
- A Logout

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	8500.00	<u>View</u>
2	To and Fro expenses	25000	3000.00	<u>View</u>
3	Accommodation charges	25000	0.00	<u>View</u>
4	Other charges finance	25000	0.00	<u>View</u>
	Total	100000	11500	
			Deny	Squar.

		Ban	k Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	CANARA BANK	UPPIN RAJENDRA BASAPPA	5042010002033	CNRB0010504

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/inc	dex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	JTIONS.COM/FIN_ASSIST/INDE	EX.PHP/CORE/ASS_LIST)
₱ Final Approved List (https://flixirsolutions.com/fin_assist/in	A. To be filled by the faculty dex.php/Core/claimed_report)	member:	3. Qualification	4 Designation
60 Hoor Monton		DrKumar Vinchurkar	M.S,DNB Surgical Oncol	4. Designation I/C HOD Associate Profe
(https://flixirsolutions.com/fin_assist/ind		Direction vincinaria	W.S,DIAB Surgical Officor	I/C HOD Associate Profe
Bank Details	5. Department	6. Institution	7. Email Id	8. Date of joining the
(https://flixirsolutions.com/fin_assist/ind	dex.psp/giose/blanko@etails)	J N Medical College	vkumar_007@yahoo.cor	Institution 01-01-2018
Change Password (https://flixirsolutions.com/fin_assist/in-	dex.php/Core/changepass) B. Particulars and assignme	nt in the conference:		01-01-2016
<u> Logout</u>				
(https://flixirsolutions.com/fin_assist/ind	Symposium	rence / Seminar /	View File	i
	Understanding latest technol	OCIV	14446 conference 1.pdf)	assist/uploads/1623b0915
	Onderstanding latest teeling	ogy	,	
	2. Benefits to be derived for	•	Please enclose a separate	sheet.
	aforesaid Conference / Se	minar / Symposium	Choose File No file chose	n
	3.Assignment in the aforest / Symposium	said Conference / Seminar	a) Delivering key-note address/orations/plenar	y lectures
			b) Contributing the scie	ntific paper
			c) Chairing a scientific s	session
			d) International collabor exchange program(only	i l
			e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	to discuss
			f) Others. if any. specify	. ,
	C.Particulars of the conference being attended	(YES •		
	a) Title of the Conference / Seminar / Symposium	Skill sets in Surgical C	b) Date of conduct	25-03-2022
	c) Venue	EBUS Workshop at N	d) Financial support extended by the University	78500 23-03-2022
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File (https://flixirsolutions.c om/fin_assist/uploads/ 1623b091516f16_EL APPLICATION FORM.pdf)		
	Note : The faculty member is Conference in a calendar year		t to attend one State / Zonal	and one National
Ī	D.Particulars of the organize	rs of the aforesaid Conferen	ce / Seminar / Symposium	
	a) Name of the Organizer	MIDCON IASO	b) Title of the program	Skill sets in Surgical C
	c) Place	SHILLONG	d) Duration	3 v

E, Expenses involved toward	ds attending the Conferenc	e:		
a) Place	SHILLONG			_
b) Mode of Journey	By Air	Ÿ		
Amount in Rs		. 6		
c) Fare	20000.00	d) To and For exp.		20000.00
e) Registration /	6000,00	f) Accommodation		25000.00
Delegation Fee	6000.00	charges		25000,00
g) Other charges	7500.00	Total Expenses		78500.00
F. Documents to be submitte	ed:			
a) Copy of the letter of invita	ation from the organizers,	View File (https://flixirsolutions.co 17647_conference 1,p		ssist/uploads/1623b09
b) Copy of the full text of do prepared by the applicant fo		View File (https://flixirsolutions.co 186b8_conference 1.p	- 5	ssist/uploads/1623b09
	DEC	LARATION		
I hereby declare that :				
for attending the aforesaid Co I shall produce necessary bil University from the date of atte I shall conduct a seminar for	nference, lls / receipts along-with Atten ending the aforesaid Confere the benefit of the faculty mei	dance / Participation Certific nce, nbers of the Department / I	cate with	in fifteen days to the
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for attending the aforesaid Co I shall produce necessary bil University from the date of att I shall conduct a seminar for and experience gained from a I shall reimburse the amount Accept terms a	nference, Ils / receipts along-with Attendending the aforesaid Confere the benefit of the faculty menuittending the aforesaid Confere to the University in excess of and conditions Com Name	dance / Participation Certificance, mbers of the Department / Interence. If the eligibility	nstitution 23-03-2 r. eerappa	comment Approved. The Incentives will be released after submission of the original bills
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Application

Final Approved List

User Master

Bank Details

⚠ Change Password

■ Logout

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	6000.00	<u>View</u>
2	To and Fro expenses	25000	20000.00	<u>View</u>
3	Accommodation charges	25000	25000.00	<u>View</u>
4	Other charges finance	25000	7500.00	<u>View</u>
	Total	100000	58500	
			Deny	111111111111111111111111111111111111111

		Bank	Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara Bank,KLE hospital branch	KUMAR VINCHURKAR	8515101045826	CNRB0008515

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

⚠ <u>Application</u> (<u>https://flixirsolutions.com/fin_ass</u>	sist/index.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/IND	EX.PHP/CORE/ASS_LIST)
Final Approved List (https://flixirsolutions.com/fin_ass	A. To be filled by the faculty sist/index.php/Core/claimed_report)			
⚠ User Master	1. Employee ID	2. Name	3. Qualification	4. Designation
(https://flixirsolutions.com/fin_ass	sist/index.php/Core/User_page)	Dr. Harpreet Kour	Ph.D.	Teaching Staff
Bank Details (https://flixirsolutions.com/fin_ass	5. Department sist/index நூத்துச்சூank Details)	6. Institution	7. Email Id	8. Date of joining the Institution
	sisteriocx.phpysiphiggarite Details)	J N Medical College	harpreet.kour@yahoo.cc	01-08-2013
Change Password (https://flixirsolutions.com/fin_ass	sist/in dex.php/Co re/changepass)			01 00 2010
<u> Logout</u>	sist/in dex.php/Co re/changepass) B. Particulars and assignme	ent in the conference:		
	sist/index.php/Gara/adminf lacout)nfo	erence / Seminar /	View File	
	Symposium			n assist/uploads/1623bf552
	Sports Medicine		5ed56 Paper Presentation	Schedule.docx)
	2. Benefits to be derived t	from participation in the	Please enclose a separate	shoot
	aforesaid Conference / Se	•	6	
			Choose File No file chose	en _
	3.Assignment in the afore / Symposium	esaid Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures
			b) Contributing the scie	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(only	1 i
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit:	to discuss
			f) Others. if any. specify	<i>.</i>
	C.Particulars of the conference being attended	(YES Y		*
	a) Title of the Conference / Seminar / Symposium	Athlete Health: Moving	b) Date of conduct	24-03-2022
	c) Venue	Saveetha Medical Col	d) Financial support extended by the University	16000 24-03-2022
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File (https://flixirsolutions.c om/fin_assist/uploads/ 1623bf5525fc07 2022 0323 171430.jpg)		
	Note : The faculty member is Conference in a calendar ye		t to attend one State / Zonal	and one National
	D.Particulars of the organize	ers of the aforesaid Conferen	ce / Seminar / Symposium	
	a) Name of the Organizer	Indian Society of Spor	b) Title of the program	Athlete Health: Moving
	c) Place	Saveetha Medical Col	d) Duration	(3 V) (Day V)

	24-03-2022	f) Financial grant sought		16000
E. Expenses involved toward	ds attending the Conferen	ce:		
\ 				
a) Place	Chennai			
b) Mode of Journey	(By Air		•	-
Amount in Rs				
c) Fare	13000.00	d) To and For exp).	13000.00
e) Registration /	2500.00	f) Accommodation	n	4200.00
Delegation Fee		charges		4200.00
g) Other charges	1000.00	Total Expenses		33700.00
F. Documents to be submitte	d:			
a) Copy of the letter of invita	tion from the organizers.	View File (https://flixirsolutions.of 638ec ISSEMCON.de		assist/uploads/1623bf
b) Copy of the full text of doc prepared by the applicant for		View File (https://flixirsolutions.c 63b7b_Abstract.docx		assist/uploads/1623bf
	DEC	CLARATION		
I hereby declare that :				
I have furnished the informative I am not getting any financial for attending the aforesaid Convolution I shall produce necessary bills University from the date of attevel I shall conduct a seminar for the state of the state	assistance / support from th ference, s / receipts along-with Atten nding the aforesaid Confere the benefit of the faculty me	dance / Participation Certifience, mbers of the Department /	ficate with	nin fifteen days to the
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I am not getting any financial for attending the aforesaid Con I shall produce necessary bills University from the date of atte I shall conduct a seminar for tand experience gained from att I shall reimburse the amount and except terms and except terms are Accept terms and Accept terms are To The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith the presentation scientific paper (porthanking you,	assistance / support from the ference, so / receipts along-with Attending the aforesaid Confere the benefit of the faculty mentending the aforesaid Confere to the University in excession and conditions Committee Name	dance / Participation Certifience, mbers of the Department / rence. of the eligibility	Institution 24-03-2 Or. /eerappa mat for gr. Conference	comment Approved. The Incentives will be released after submission of the original bills ant of financial suppose for kind considerat

Welcome finance

- & Application
- Final Approved List
- User Master
- Bank Details
- Change Password
- ≜ Logout

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	2500.00	<u>View</u>
2	To and Fro expenses	25000	13000.00°	<u>View</u>
3	Accommodation charges	25000	4200.00	<u>View</u>
4	Other charges finance	25000	1000.00	<u>View</u>
	Total	100000	20700 +	
			Deny	Approve

		Baı	nk Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara Bank	DR HARPREET KOUR	5042010082706	CNRB0010504

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

<u>Application</u> ttps://flixirsolutions.com/fin_assist/inde	ex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	JTIONS.COM/FIN_ASSIST/INDI	EX.PHP/CORE/ASS	_LIST)
Final Approved List ttps://flixirsolutions.com/fin_assist/inde	A. To be filled by the faculty	/ member:			
	1. Employee ID	2. Name	3. Qualification	4. Designation	
<u>User Master</u> ps://flixirsolutions.com/fin_assist/inde	101119111 ex.php/Core/User_page)	Abhijit Dinesh Bhatkal	B.E., M.Sc.	Teaching Staff	
Bank Details	5. Department	6. Institution	7. Email Id	8. Date of joini	ng the
ps://flixirsolutions.com/fin_assist/inde	ex.pkp/Core/Benk Details)	KLE University Staff	abhijitbhatkal@gmail.cor	Institution	
Change Password				20-06-2019	
os://flixirsolutions.com/fin_assist/inde	x.php/Core/changepass) B. Particulars and assignme	ent in the conference:			
Logout					
s://flixirsolutions.com/fin_assist/inde	<u>ex.pnp/sjeraledan6f tegeoti</u> nfe Symposium	erence / Seminar /	<u>View File</u> (https://flixirsolutions.com/fi	n_assist/uploads/16	523d9086
	It will address several crucia	al and contemporary issues or	02f44 objective.docx)		
	2. Benefits to be derived		Please enclose a separate	e sheet.	
	aforesaid Conference / Se	eminar / Symposium	Choose File No file chose	en	
	3.Assignment in the afore	esaid Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures	
			b) Contributing the scie	entific paper	V
			c) Chairing a scientific	session	
			d) International collabo exchange program(only		
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit	l to discuss	
			f) Others. if any. specify	y.	
	C.Particulars of the conference being attended	(YES ♥			
	a) Title of the Conference / Seminar / Symposium	Redefining Ethnophar	b) Date of conduct	22-04-2022	
	c) Vėnue	JSS College of Pharm	d) Financial support extended by the University	16000 22-04-2022	1000
	e. Quantum of financia eligible	ıl grant			
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	Ÿ	
	f) Copy of the sanction letter to be enclosed	View File (https://flixirsolutions.com/fin_assist/uploads/ 1623d908603962_AD B JSS Authorisation letter.pdf)			
	Note : The faculty member Conference in a calendar ye	is eligible for financial suppo ear.	rt to attend one State / Zona	l and one Nationa	I
=	D.Particulars of the organia	zers of the aforesaid Conferer	nce / Seminar / Symposium		
	a) Name of the Organizer	Society for Ethnophar	b) Title of the program	Redefining Eth	nophar
	c) Place	JSS College of Pharm	d) Duration	(3 v)	

e) Date of conference	22-04-2022	f) Financial grar sought	nt	yes	
E. Expenses involved toward	ds attending the Conference	e:			
a) Place	Mysore				
b) Mode of Journey	By Road	→)			
<i>z</i> ,,	(b) Nodu				
Amount in Rs					
c) Fare	2200.00	d) To and For ex	cp.	400.00	
e) Registration / Delegation Fee	2500.00	f) Accommodati charges	ion	4000.00	
g) Other charges	0.00	Total Expenses		9100.00	MA VIN
F. Documents to be submitte	ed:		ı		
a) Copy of the letter of invita	ation from the organizers.	View File (https://flixirsolution 03a9c_ADB JSS or			
b) Copy of the full text of do prepared by the applicant fo		View File (https://flixirsolution 03b87_ADB JSS A			1623d90
	DEC	LARATION			
I hereby declare that : I have furnished the informati I am not getting any financial for attending the aforesaid Cor I shall produce necessary bill University from the date of atte I shall conduct a seminar for	assistance / support from the ofference, Is / receipts along-with Attend ending the aforesaid Conferer the benefit of the faculty men	e sponsorers of the Con lance / Participation Cer nce, nbers of the Departmen	ference or a	any other fund in fifteen days	to the
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(Day

Welcome finance

Application

♣ Final Approved List

User Master

Bank Details

Change Password

A Lagout

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	2500.00	<u>View</u>
2	To and Fro expenses	25000	2875.00	<u>View</u>
3	Accommodation charges	25000	998.00	<u>View</u>
4	Other charges finance	25000	0.00	<u>View</u>
	Total	100000	6373	
			Deny	/-DSCOVE

		Ва	nk Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1		ABHIJIT	5042010077663	

9	Welcome
	finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

	CONFERENCES			
<u>Application</u> tps://flixirsolutions.com/fin_assis	t/index.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/IND	EX.PHP/CORE/ASS_LIST)
Final Approved List ps://flixirsolutions.com/fin_assis	A. To be filled by the faculty Vindex.php/Core/claimed_report) 1. Employee ID	member:	3. Qualification	4. Designation
<u>User Master</u> ps://flixirsolutions.com/fin_assis		Akshata Shivaling Sango	M.Sc, Ph. D (ongoing)	Teaching Staff
	5. Department		48	
Bank Details os://flixirsolutions.com/fin_assis	t/index.php/Boge/Bank_Details)	6. Institution	7. Email Id	8. Date of joining the Institution
Change Password	- THE STATE OF THE	J N Medical College	akshatasangolli@gmail.c	12-05-2016
os://flixirsolutions.com/fin_assis	t/in dex.php/Core/changepass) B. Particulars and assignme			
Logodi				
os://flixirsolutions.com/fin_assis	t/index.php/Gjara/adminf Ingout)nfe	erence / Seminar /	View File	
	Symposium			n_assist/uploads/162555902
	National Conference on		1040e Mrs.Akshata Kuven 2022.pdf)	ipu Comerences April
	2. Benefits to be derived f		Please enclose a separate	sheet.
	aforesaid Conference / Se	minar / Symposium	Choose File No file chose	en,
	3.Assignment in the afore / Symposium	said Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures
			b) Contributing the scie	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(only	
			e) Panel discussion or talks/lectures or invited arts/skills(only on invita	to discuss
			f) Others. if any. specify	
	C.Particulars of the conference being attended	(NO V		
	a) Title of the Conference / Seminar / Symposium		b) Date of conduct	dd-mm-yyyy
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	Z
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member is Conference in a calendar yea		t to attend one State / Zonal	and one National
	D.Particulars of the organize	rs of the aforesaid Conferen	ce / Seminar / Symposium	
	a) Name of the Organizer	Department of Bioche	b) Title of the program	National Conference (
	c) Place	Shivamogga	d) Duration	(2 V) (Day V)

e) Date of conference

30-03-2022

f) Financial grant

National conference

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	250.00	<u>View</u>
2	To and Fro expenses	25000	8040.00	<u>Víew</u>
3	Accommodation charges	25000	2500.00	<u>View</u>
4	Other charges finance	25000	1910.00	<u>View</u>
	Total	100000	12700	
			Deny	Approve

		Bai	nk Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara Bank, Nehru Nagar branch	akshata Sangolli	5042180018606	CNRB0010504

Welcome
finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

<u>Application</u> ttps://flixirsolutions.com/fin_assist	/index.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/IND	EX.PHP/CORE/ASS_LIST)
Final Approved List tps://flixirsolutions.com/fin_assist	A. To be filled by the faculty /index.php/Core/claimed_report) 1. Employee ID	member:	3. Qualification	A Designation
Hoor Master		Maya Shivanand Shet	M.Sc, Ph. D (ongoing)	4. Designation
ps://flixirsolutions.com/fin_assist				Teaching Staff
Bank Details ps://flixirsolutions.com/fin_assist	5. Department	6. Institution	7. Email Id	8. Date of joining the
	/index president details)	J N Medical College	mayamystik@gmail.com	Institution 01-07-2014
<u>Change Password</u> os://flixirsolutions.com/fin_assist	/in dex.php/Core/changes sss			01-07-2014
Logout	/in dex.php/Cere/changepass) B. Particulars and assignme	ent in the conference:		
	/index.php/Gara/adminf togothnfe	erence / Seminar /	View File	
	Symposium		(https://flixirsolutions.com/fi	
	National Conference on		4900c Maya Kevempu Cor	nferences March 2022,pdf)
	2. Benefits to be derived f	rom participation in the	Please enclose a separate	sheet
	aforesaid Conference / Se		Choose File No file chose	
	2 Accionment in the efect	140		211
	/ Symposium	said Conference / Seminar	 a) Delivering key-note address/orations/plena 	ry lectures
			b) Contributing the scie	entific paper
			c) Chairing a scientific	
	,		d) International collabo exchange program(only	1 1
			e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	to discuss
			f) Others. if any. specify	
	C.Particulars of the conference being attended a) Title of the Conference / Seminar /	(NO V	b) Date of conduct	dd-mm-yyyy
	Symposium			
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		•
	Note : The faculty member is Conference in a calendar yea		t to attend one State / Zonal	and one National
	D.Particulars of the organize	rs of the aforesaid Conference	ce / Seminar / Symposium	
	a) Name of the Organizer	Department of Bioche	b) Title of the program	National Conference (
	c) Place	Shivamogga	d) Duration	(2 V) (Day V)
	e) Date of conference	30-03-2022	f) Financial grant	National conference -

f) Financial grant

National conference -

		sought	
E. Expenses involved towa	rds attending the Conference	ee:	
a) Diagram			
a) Place	Shivamogga		
b) Mode of Journey	(By Road	<u> </u>	
Amount in Rs			
c) Fare	8040.00	d) To and For exp.	0.00
e) Registration / Delegation Fee	250.00	f) Accommodation charges	0.00
g) Other charges	2500.00	Total Expenses	10790.00
F. Documents to be submitt	ed:		
a) Copy of the letter of invit		View File (https://flixirsolutions.com 49e90 conference Invitat	n/fin_assist/uploads/162555as tion.pdf)
b) Copy of the full text of do prepared by the applicant for	ocuments / abstract / paper or presentation.	View File	
	DEC	LARATION	
I have furnished the informat I am not getting any financial or attending the aforesaid Co I shall produce necessary bil Iniversity from the date of atte	ls / receipts along-with Attenda anding the aforesaid Conferen	sponsorers of the Conference ance / Participation Certificate ce.	e or any other funding agence within fifteen days to the
I have furnished the informat I am not getting any financial or attending the aforesaid Cor I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for and experience gained from at I shall reimburse the amount	assistance / support from the nference, is / receipts along-with Attenda ending the aforesaid Conferen the benefit of the faculty mem ttending the aforesaid Confere to the University in excess of	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince.	e or any other funding agence within fifteen days to the
I have furnished the informat I am not getting any financial or attending the aforesaid Co. I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for nd experience gained from a	assistance / support from the nference, is / receipts along-with Attenda ending the aforesaid Conferen the benefit of the faculty mem ttending the aforesaid Confere to the University in excess of	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Insti- ence. the eligibility	e or any other funding agence within fifteen days to the
I have furnished the informat I am not getting any financial or attending the aforesaid Cor I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for not experience gained from at I shall reimburse the amount	assistance / support from the nference, is / receipts along-with Attenda ending the aforesaid Conferen the benefit of the faculty mem ttending the aforesaid Confere to the University in excess of	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility Date: 12-	e or any other funding agence within fifteen days to the studied tution to share the knowledge
I have furnished the informat I am not getting any financial or attending the aforesaid Cor I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for and experience gained from at I shall reimburse the amount	assistance / support from the nference, ls / receipts along-with Attendiending the aforesaid Conferenthe benefit of the faculty mematending the aforesaid Conferent to the University in excess of nd conditions Comm	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility Date: 12-	e or any other funding agence within fifteen days to the stution to share the knowledge
I have furnished the informat I am not getting any financial or attending the aforesaid Cor I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for and experience gained from at I shall reimburse the amount	assistance / support from the inference, ls / receipts along-with Attendiending the aforesaid Conferenthe benefit of the faculty memetending the aforesaid Conferento the University in excess of ind conditions	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility	e or any other funding agence within fifteen days to the stution to share the knowledge 04-2022 Comment
or attending the aforesaid Co. I shall produce necessary bil Iniversity from the date of atte I shall conduct a seminar for nd experience gained from at I shall reimburse the amount Accept terms a	assistance / support from the nference, ls / receipts along-with Attendiending the aforesaid Conferenthe benefit of the faculty mematending the aforesaid Conferent to the University in excess of nd conditions Comm	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility Date: 12-	ce or any other funding agence within fifteen days to the stution to share the knowledge 04-2022 Comment Upload all Original
I have furnished the informat I am not getting any financial or attending the aforesaid Co. I shall produce necessary bil Iniversity from the date of atte. I shall conduct a seminar for not experience gained from at I shall reimburse the amount Accept terms a A	assistance / support from the nference, is / receipts along-with Attending the aforesaid Conferenthe benefit of the faculty memetending the aforesaid Conferento the University in excess of nd conditions Comm Name	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility	ce or any other funding agence within fifteen days to the sitution to share the knowledge od-2022 Comment Upload all Original Bills
I have furnished the informat I am not getting any financial or attending the aforesaid Co. I shall produce necessary bil iniversity from the date of atte. I shall conduct a seminar for not experience gained from at I shall reimburse the amount Accept terms a A	assistance / support from the nference, is / receipts along-with Attendiending the aforesaid Conferenthe benefit of the faculty mematending the aforesaid Conferento the University in excess of nd conditions Comm Name	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility	ce or any other funding agence within fifteen days to the sitution to share the knowledge od-2022 Comment Upload all Original Bills
I have furnished the informat I am not getting any financial or attending the aforesaid Co. I shall produce necessary bil Iniversity from the date of atte. I shall conduct a seminar for not experience gained from at I shall reimburse the amount Accept terms a Accept terms a 1 shall reimburse the aforement and the Registrar, AHER, elgaum.	assistance / support from the nference, is / receipts along-with Attending the aforesaid Conferenthe benefit of the faculty memetending the aforesaid Conferento the University in excess of nd conditions Comm Name	sponsorers of the Conference ance / Participation Certificate ce, bers of the Department / Instince. the eligibility	ce or any other funding agence within fifteen days to the sitution to share the knowledge out-2022 Comment Upload all Original Bills Or grant of financial support for grant of financial support for grance for kind consideration.

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	250.00	<u>View</u>
2	To and Fro expenses	25000	8000.00	<u>Viểw</u>
3	Accommodation charges	25000	2500.00	<u>View</u>
4	Other charges finance	25000	1910.00	<u>View</u>
	Total	100000	12660	
			Deny	Approve

		В	ank Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara Bank, Nehru Nagar branch	MAYA K	5042180018606	CNRB0010504

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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/ir	ndex.php/Core/ass_list)	LIST	(HTTPS://FLIXIRSOLU	JTIONS.COM/FIN_ASS	SIST/INDEX.	PHP/CORE/ASS_LIST)
₱ Final Approved List (https://flixirsolutions.com/fin_assist/ir	A. To be filled by the faculty ndex.php/Core/claimed_report)	/ member:				
Macter Master				3. Qualification		4. Designation
(https://flixirsolutions.com/fin_assist/in	ndex.php/Core/User_page)	Kalyani	. Killekar	M.Sc, Ph. D (ongo	ping)	Teaching Staff
Bank Details (https://flixirsolutions.com/fin_assist/ir	5. Department ndexநூர்திலேக்சித்தாக் <u>Details)</u>	6. Institu	ution dical College	7. Email ID kalyanikillekar500.l	⟨k@arr	8. Date of joining the Institution
Change Password				, , , , , , , , , , , , , , , , , , , ,		23-03-2018
(https://flixirsolutions.com/fin_assist/ir	dex.php/Core/changepass) B. Particulars and assignment	ent in the c	conference:			
<u> Logour</u>			,0,1,0,0,1,00,			
(https://flixirsolutions.com/fin_assist/ir	Conference / Seminar / Symposium		its to be derived fro d Conference / Sem	m participation in th inar / Symposium	1e	Please enclose a separate sheet.
	National Conference on					View File (https://flixirsolutions.com/f in_assist/uploads/162555d d01276c_Kalyani Kevempu Conferences March 2022.pdf)
	3. Assignment in the aforesa	aid Confer	ence / Seminar / Sy	mposium		
	a) 👨		b)		c) Othe	re
	Contribut		Deliverin		if any.	rs. ₀
	ing a sclentific		g a guest		specify	
	paper		lecture			1,3
	(poster or oral)					
	4. Details of the financial su by the University to attend th					
	NO	$\overline{\mathbf{y}}$				
	a) Title of the Conference /		b) Date of conduct	<u>.</u>	c) Level o	f Conference (State /
	Seminar / Symposium		dd-mm-yyyy		Zonal / Na	,
					Select	
			d) Venue		e) Financi	al support extended by
				-	the Unive	
	f) Copy of the sanction letter	r to be	* 0.00		Amoun	t dd-mm-yyy
	View File					
						4
	Note : The faculty member is Conference in a calendar year		or financial support	to attend one State	/ Zonal and	one National
i	C. Particulars of the organize	ers of the	proposed Conference	ce / Seminar / Symp	osium:	
	a) Name of the Organizer		b) Title of the prog		c) Place	
	Department of Biochemistry , K	uvem	National Conference	e on	Shivamog	ga
	d) Duration		e) Date		f) Eligible	amount
	2 Day 🗸	~	30-03-2	250	_	onference-16000/-
-					- Tuttorial o	*
	D. Expenses involved toward					
	a) Place	b) Mode of journey	of			
	Shivamogga	By Road		9		
	c) Fare		d) To and For exp.		e) Registra	tion / Delegation Fee
	8040.00		0.00		250.00	
	f) Accommodation charges		g) Other charges			1000
	0.00		2500.00		10790.00	1363

E. Documents to be submitted:

a) Copy of the letter of invitation from the organizers.

<u>View File</u> (https://flixirsolutions.com/fin_ass

(https://flixirsolutions.com/fin_ass ist/uploads/162555dd01338c_conf erence Invitation.pdf) b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.

View File

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,

		ots along-with Attendance / Participation Certificate within fifteen days to g the aforesaid Conference,
• I shall conduct knowledge and e	a seminar for the bene experience gained from	attending the aforesaid Conference. siversity in excess of the eligibility.
Accept terms and conditions		Da 12-04-20; te :
		Comments
Name	SINo Comment	
1	Dr. Veerappa	Kindly upload the original bills
	sentation scientific pa	ntion of the above Teacher in the prescribed format for grant of financial oer (poster or oral) / delivering a guest lecture to attend the Conference
Yours faithfully	,	Signature of the HoD Principal
Add Your Con	nment Here Comment	

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Application

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	250.00	<u>View</u>
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3	Accommodation charges	25000	2500.00	<u>View</u>
4	Other charges finance	25000	1910.00	<u>View</u>
	Total	100000	12700	
			Deny	Alguana

		Ва	nk Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara Bank, Nehru Nagar branch	KALYANI KILLEKAR	5042180027365	CNRB0010504

M. MEDICAL COLLEGE





ENLOUCATION AND RESEARCH

(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEMPS TATE / NATIONAL CONFERENCES

(To be submitted to the Chiversity through A. To be filled by the faculty member:	
1. Name	Dr. Rachana Raghavendra Kulko
2. Qualification	MBBS, MD CAratomy)
Takke dalah dan paga ang manggap kappangan agam dan dajaka ana ang manggap kappangan ang manggap kappan ang manggap kappan ang manggap kappan ang manggap kappan ang manggap kap	Asst. professor
3. Designation	The second state of the se
4. Department 5. Email ID	drirachanak85@gmailicom
A second for the second	
6. Institution	J.N.M.C.
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	15,09,2015,
8. Objectives of the Conference/ Seminar / Symposium	oral presentation
Benefits to be derived from participation in the aforesaid Conference Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
- 40	b) Contributing a scientific paper
$\sqrt{}$	c) International collaboration exchange program (only on invitation)
di .	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
11. Particulars of the Conference being attended	
	Society of Clinical Anatomis
b) Date of conduct	
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals	State Level : Rs. 8,000/-
expenses, whichever is less)	National Level: Rs.16,000/-
e) Venue	Pehradun
f) Copy of the sanction letter along-with Brochure to be enclosed	
Note: The faculty member is eligible for financial support to attend one St.	ate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support previously extended by the University Academy of Higher Education	GN
a) Name of the Organizer FINANCE SECTION	OFFICE OF THE REGISTRAR
b) Title of the program	KLE Academy of Higher Education
c) Place 2 0 JUN 2027	& Research, BELAGAVI
d) Duration A Date of Conference Inward No. 0.31 Sign	0 9 JUN 2022
e) Date of Conference Inward No. Co. Signamore	



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	A A Kanar Ottomod
1. Name	MBBS. me plangs
2. Qualification	
3. Designation	Inferior & Unit chief
4. Department	Engler (ORL 4 teas)
5. Institution	IN me Belgan
6. Email ID	aharyep @ Schoo.com
7. Date of joining the Institution	Recul freeds in ORRA fers
8. Objectives of the Conference / Seminar / Symposium	Reent freeds in ORLA fers
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	d Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	c) Others, if any, specify.
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January 31st December)	to - NIL -
a) Title of the Conference / Seminar / Symposium	Carpenie Francia
b) Date of conduct	14 to 16/10/2021
c) Level of Conference (State / Zonal / National)	Soual & state
d) Venue	OFFICE OF THE REGISTRAR
e) Financial support extended by the University	& Research, BELAGAVI
f) Copy of the sanction letter to be enclosed	2 2 OCT 2022
Note: The faculty member is eligible for financi support to attend one State / Zonal and one Nation Conference in a calendar year.	41 0 11 1
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Ad Marifal
b) Title of the program	1th 52 9 390 AOIK
c) Place	manful
d) Duration	14 to 6 oct 2021 3 day
e) Date	14/10/22 / 16/20/20
f) Amount claimed	25 X





KLE ACADEMY OF HIGHER EDUCATION AND

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

Medical Colle

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

(10 be sabitime	
A. To be filled by the faculty member:	D. O. D. Dollaval
. Name	Gr. B. P. Belala Jeon
2. Qualification	Ballery B
3. Designation	Police
1. Department	EN Lelapus
5. Institution	JNMC, Arecomorto
5. Email ID	pur fau wa e rest
7. Date of joining the Institution	State and South zone (
Objectives of the Conference / Seminar / Symposium	Please enclose a separate sheet.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	
Assignment in the aforesaid Conference / Seminar / Symposium	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December)	HOINCON 2022
a) Title of the Conference / Seminar / Symposium	14.10.22 -16-10.22
b) Date of conduct	1 1 0 0 0 10 0 1
c) Level of Conference (State / Zonal / National)	3,7000
d) Venue	Manipar
e) Financial support extended by the University	1 12
f) Copy of the sanction letter to be enclosed	· CMOON
Note: The faculty member is eligible for financisupport to attend one State / Zonal and one Nation Conference in a calendar year.	al al
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	KARNATONE AOI
a) Name of the Organizer	MATERIA TO THE CONTRACT ONE
b) Title of the program	State one send. The
c) Place	Mary
OFFICE OF T	HE REGISTRADI COMPANY
KLE Academy o	this art () whaten and
f) Amount claimed	
220	DET 2022

ward No.....Slone



KLE ACADEMY OF HIGHER EDUCATION

(Formerly known as KLE University) **Oartment O

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	DR. PRITIS HAJARE
2. Qualification	MBBS, DLO, DNB, PKB, DORL
3. Designation	Professor
4. Department	Dent d FAIT E HAIS
5. Institution	Jept of ENT & HNS J.N. Medical collège
6. Email ID	depritibajare @gmail.com
7. Date of joining the Institution	3013(05
8. Objectives of the Conference / Seminar / Symposium	southrone ENT conference
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	b) Delivering a guest lecture c) Others, if any, specify.
 Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) 	NIL 8000/1
a) Title of the Conference / Seminar / Symposium	
b) Date of conduct	
c) Level of Conference (State / Zonal / National)	OFFICE OF THE REGISTRAR
d) Venue	KLE Academy of Higher Education KLE Academy of Higher Education
e) Financial support extended by the University	
f) Copy of the sanction letter to be enclosed	2 0 OCT 2022
ote: The faculty member is eligible for financial apport to attend <u>one State / Zonal</u> and <u>one National onference</u> in a calendar year.	Inward No.
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Karntaka & Maria I AME
b) Title of the program	Karntaka & Manipal AOI South Zone & Karnataka statest
c) Place	Kasturba Medical College Mani
d) Duration	3 days
e) Date f) Amount claimed	14th, 15th & 16th Oct 2022
f) Amount claimed	14 113 a 16 OCT 2022





KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University thro	ough the concerned HoD & Principal)
A. To be filled by the faculty member:	•
1. Name	DE LAXMI DESHPANDE
2. Qualification	MBBS MD DNB
3. Designation	ASSISTANT PROFESSOR
4. Department	MICROBIOLOGY - BSRC
5. Email ID	despande laxmi 18@gmail
6. Institution	JNMC, deputed to BSRC
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	15-12-2021
8. Objectives of the Conference / Seminar / Symposium	Paper Prescription
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11. Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	26th chapter Mahamusocor
b) Date of conduct	16th - 18th Sept /02
c) Level of Conference	State / National
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/-
e) Venue	BJMC, Pune, Maharashlio
Copy of the sanction letter along-with Brochure to be enclosed	
Note: The faculty member is eligible for financial support to attend one S	tate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	NA.
a) Name of the Organizer	
b) Title of the program	
c) Place	
d) Duration	
e) Date of Conference	
f) Financial grant availed	



KLE ACADEMY OF HIGHER EDUCATION AND ESTATE (Formerly known as KLE University)

Medical Cor

(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

. To be filled by the faculty member:	DR. RAJESH. R. HAVALDAR
. Name	MBBS, MS, DNB, MNAMS, follows his
. Qualification	MBBS, MIS, DIND, MONTH , HELDE NEW
. Designation	Assistant Projessor.
. Department	ENT & HOUSE.
5. Institution	J. N. Medical College
3, Email ID	Rajeshhavard arter yarros
7. Date of joining the Institution	Rajeshhavaldar@yahobolom 22/07/2019. South 20nes Karnataka State golcon.
8. Objectives of the Conference / Seminar / Symposium	
 Benefits to be derived from participation in the aforesa Conference / Seminar / Symposium Assignment in the aforesaid Conference / Seminar / Symposium 	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify, video presentation
11. Particulars of the financial support already extend by the University to attend the similar Conference of selectors were 1st January	nded ence by to will cut his cut.
(s) during the current calendar year (s) 31st December)	y to will will
(s) during the current calendar your	OFFICE OF THE REGISTRAR
(s) during the current calendar year of 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct	OFFICE OF THE REGISTRAR KLE Academy of Higher Education
(s) during the current calendar year (31st December) a) Title of the Conference / Seminar / Symposium	OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI
(s) during the current calendar year of 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue	OFFICE OF THE REGISTRAR KLE Academy of Higher Education
(s) during the current calendar year of 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University	OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI
(s) during the current calendar year of 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed	OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI 1.1. OCT 2022 Inward No
(s) during the current calendar year of 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for final support to attend one State / Zonal and one National Conference in a calendar year.	OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI 1.1. OCT 2022 Inward No
 (s) during the current calendar year. 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	A Research, BELAGAVI Inward No
 (s) during the current calendar year. 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	A Research, BELAGAVI Inward No
 (s) during the current calendar year. 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	A Research, BELAGAVI Inward No
 (s) during the current calendar year. 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	Manipal Academy of the her Education South 2016 & Karnataka State Apri Manipal Academy of the her Education South 2016 & Karnataka State Apri Manipal, Kannataka.
 (s) during the current calendar year. 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	Manipal Academy of the her Education South 2016 & Karnataka State Apri Manipal Academy of the her Education South 2016 & Karnataka State Apri Manipal, Kannataka.
(s) during the current calendar year 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for fina support to attend one State / Zonal and one Na Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program c) Place	OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI 1.1. OCT 2022 Inward No



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

A. To be filled by the faculty member:	Agreement of the second
1. Name	
2. Qualification	Dr. Jany Bahadur Pressed
3. Designation	Ph.D.
4. Department	Associate Professor
5. Institution	Epidemislogy and Brostatistics
6. Email ID	ALE Madery of Englur Educate
7. Date of joining the Institution	jbiips 12@ mail con
8. Objectives of the Conference / Seminar / Symposium	1st Feb, 2019
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	To present the finding of descourch Papara
10. Assignment in the aforesaid Conference / Seminar / Symposium	b) Delivering a guest lecture c) Others, if any, specify.
1. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December)	d e o
a) Title of the Conference / Seminar / Symposium	IASP Northern Regional Conference.
b) Date of conduct	Sent an a series enel.
c) Level of Conference (State / Zonal / National)	Sept 29-30,2022
d) Venue	Northern Regional Conference
e) Financial support extended by the University	Kashmir, Shringar
Copy of the sanction letter to be enclosed	700
te: The faculty member is eligible for financial opert to attend one State / Zonal and one National ofference in a calendar year.	7-es
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	Conference
a) Name of the Organizer	
b) Title of the program	TASP with collaboration with PRC, Un
OFFICE OF THE REGISTRAR	pistribution and Effect of Cotonorlaidities on
Duration KLE Academy of Higher Education & Research, BELAGAVI	Roshmir Spinagor
e) Date	two days
Amount claimed 6 0CT 2022	sept 29-30/2022 7900/
proportion sign	(1.100)





KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3 (COLLEGE)

A. To be filled by the faculty member:	140000
1. Name	Dr Madhumati Patil.
2. Qualification	MBBS.MD
3. Designation	Associations. Dropusor.
4. Department	Microbiology. JAINIC.
5. Institution	INIMIC.
6. Date of joining the Institution	07/07/2007
7. Objectives of the Conference / Seminar / Symposium	
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	Collect and of Still Sti
a) Title of the Conference / Seminar / Symposium	NIZZ 6000
b) Date of conduct	102
c) Venue	
d) Financial support extended by the University	OFFICE OF THE REGISTRAR KLE Academy of Higher Education
e) Copy of the sanction letter to be enclosed	& Research, BELAGAV!
f) Level of Conference State / Zonal / National	9 1 OCT 2022
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	12
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	Windows Torbtule of Midria
a) Name of the Organizer	crence nehradun
b) Title of the program	13th national conjuence of Health
c) Place	projustonal education ilcheliz
d) Duration	2nd 3rd Mor 2022 2 day
e) Date	2003rd xloy 2022.
f) Amount claimed	



KLE ACADEMY OF HIGHER EDUCATION AND RES

(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1960 Partment

Medical

A. To be filled by the faculty member:	D. Mariaga Megallagan
1. Name	DY VINITA METGUDMAT
2. Qualification	M.S (ENTRHNS)
3. Designation	ASSOCIATE PROFESSOR
4. Department	ENTSHNS
5. Institution	J. N. MEDICAL COLLEGE
6. Email ID	docvinita vijaya gnaili
7. Date of joining the Institution	08-07-2008
8. Objectives of the Conference / Seminar / Symposium	South Lone AOI KCON ENT Confere
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	b) Delivering a guest lecture c) Others, if any, specify
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	8000
a) Title of the Conference / Seminar / Symposium	SouthZone Activion 2022.
b) Date of conduct	October 14th 15th 216th 202
(a) to 17 and (National)	
c) Level of Conference (State / Zonal / National)	Doubold ZONAL
c) Level of Conference (State / Zonar / Nationar) d) Venue	MANIPAL
d) Venue	MANIPAL
d) Venuee) Financial support extended by the Universityf) Copy of the sanction letter to be enclosed	MANIPAL. OFFICE OF THE REGISTRAGE Academy of Higher Education A Possessich, SELAGAVI
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financia support to attend one State / Zonal and one National Conference in a calendar year. 	MANIPAL Academy of Higher Education Academy of Higher Education 2 2 OCT 2022
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National 	MANIPAL Academy of Higher Education Academy
d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year.	MANIPAL Academy of Higher Education Academy of Higher Education 2 2 OCT 2022 MANIPAL MAN
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financia support to attend one State / Zonal and one National Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium 	MANIPAL Accidency of Higher Education 22 OCT 2022 MARNATAKA ADI & MANIPA-UDI Southzonl & Karnataka Statu Adio
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financia support to attend one State / Zonal and one National Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer 	MANIPAL Academy of Higher Education 22 OCT 2022 MANIPALUDI KARNATAKA ADI & MANIPALUDI Southzone & Karnataka State Adio
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program 	MANIPAL Accidency of Higher Education 22 OCT 2022 MARNATAKA ADI & MANIPA-UDI Southzonl & Karnataka Statu Adio
 d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program c) Place 	MANIPA Academy of Higher Education Academy of Higher Education 2 2 OCT 2022 MANIPA-UDI MANIPA-UDI

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(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

A. To be filled by the faculty member:	
1. Name	Dr. Vinay-Barrer.
2. Qualification	MD (Foreric medicine of Toxicology)
3. Designation	Assictant Professon
4. Department	Forensic Medicine & Toxicology
5. Institution	Towohardal Nehou Medical College
6, Email ID	vincyman. 47@grail. con
7. Date of joining the Institution	01/07/2022
8. Objectives of the Conference / Seminar / Symposium	Current Evolution and Contempora
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	b) Delivering a guest lecture c) Others, if any, specify.
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	1.0
a) Title of the Conference / Seminar / Symposium	+///
b) Date of conduct	- N
c) Level of Conference (State / Zonal / National)	(-
d) Venue	
e) Financial support extended by the University	
f) Copy of the sanction letter to be enclosed	
Note: The faculty member is eligible for financia support to attend <u>one State / Zonal</u> and <u>one National</u> Conference in a calendar year.	1 1
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Dept of Fort, KMC Manipal-SIN FORENSICON 2022
b) Title of the program	FORENSICON 2022
c) Place	M KMC, Maripal
d) Duration & Research, BELAGAVI	3 days
e) Date 1 7 OCT 2022	7th October - 10th October, 2
f) Amount claimed 28	and a
Inward NoSign.	Aspern M.
	21





(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F. 9 19/2000-U.3(A

APPLICATION FOR FINANCIAL SUPPORT TO ATT

(To be submitted to the University throug the concerned HoD & Principal)

ment of Anaen

To be filled by the faculty member:	<u> </u>
Name	Dr. Manjunath Shivapujimath
Qualification	MBBS MD Anarsthesia
Designation	Assistant Probassor
Department	Department of Amaestheliology
Institution	J. N. Medicul collège d'isseinen
Date of joining the Institution	14-07-2017
Objectives of the Conference / Seminar / Symposium	· ·
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	 a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
 Particulars of the financial support extended by the University to attend the similar Conference (s during the current calendar year 1st pary to 31st December) 	
a) Title of the Conference / Seminar / Symposium	SARRC AA 2022
b) Date of conduct	12th, 13th a luth August 2022
c) Venue	Le Meridiah convention centre. Ke
d) Financial support extended by the University	1
time letter to be enclosed	Λ /
e) Copy of the sanction letter to be enclosed	1/6000000000000000000000000000000000000
copy of the sanction letter to be efficiosed Level of Conference State / Zonal (National)	National (south zone)
	al
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financial support to attend one State / Zonal and or Mational	al al al
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financia support to attend one State / Zonal and or Mational Conference in a calendar year. 11. Particulars of the organizers of the aforesa Conference / Seminar / Symposium The Academy of Higher Education Name of the Organizerach, BELACAVI	al al office of the registrar
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financia support to attend one State / Zonal and o Mation Conference in a calendar year. 11. Particulars of the organizers of the aforesal Conference / Seminar / Symposium	office of the registrar KLE Academy of Higher Education
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financia support to attend one State / Zonal and or Mational Conference in a calendar year. 11. Particulars of the organizers of the aforesal Conference / Seminar / Symposium a) Name of the Organizerarch, BELAGAVI	al all OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAYI
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financia support to attend one State / Zonal and o Mation Conference in a calendar year. 11. Particulars of the organizers of the aforesa Conference / Seminar / Symposium a) Name of the Organizerarch, DELACAVI b) Title of the program	office of the registrar KLE Academy of Higher Education
f) Level of Conference State / Zonal (National) Note: The faculty member is eligible for financia support to attend one State / Zonal and or Mational Conference in a calendar year. 11. Particulars of the organizers of the aforesal Conference / Seminar / Symposium a) Name of the Organizerarch, BELACAVI FINANCE SECTION b) Title of the program c) Place 2 5 AUG 2022 d) Duration e) Date Inward No.02	al all OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAYI



(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

- 2	2 -
12. Expenses involved towards attending the Conference:	
	Kerala
a) Place b) Mode of journey	Flight
e) Fare	
To and Fro expenses	15,000 Rs
Registration / Delegation Fee	10,000 RS
Accommodation charges	12,000 RS
Total Expenses	37,000 RS
13. Documents to be submitted:	
 a) Copy of the letter of invitation from the organizers b) Copy of the full text of documents / abstract / pap prepared by the applicant for presentation. 	er
DE AR	ATION
agency for attending the aloresaid doministration agency for a strength agen	Attendance / Participation Certificate within fifteen days to the conference, aculty members of the Department / Institution to share the eaforesaid Conference.
Date: 29/7/22	Signature of the faculty member

Ref. No.

Date: 1-8-2027

To

The Registrar, KLE University, Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the Conference for kind consideration.

Thanking you,

Signature of the HoD

Professor & Head

DEPARTMENT OF ANAESTHESIOLOGY

J.N. MEDICAL COLLEGE, BELAGAVI-590010.

Yours faithfully,

Principal

J.N. Medical College, BELAGAVI- 590 010



Office of the V. N. MEDICAL COLLEGE

(Formerly known as KLE Academy of Higher Education & Research (Established under Section 3 of the UGC Act. 1956 vide Government of India Notification (A) F. S. F. 200 (122(A))

APPLICATION FOR FINANCIAL SUPPO

A. To be filled by the faculty member:	
1. Name	Dr. Rajesh S. Mane
2. Qualification	Dr. Rajesh S. Mane MD DNB CAnautherda
3. Designation	Preferral.
4. Department	Anger Ber closy
5. Institution	J.N. Medical Lellege
6. Date of joining the Institution	04-12-1997
7. Objectives of the Conference / Seminar / Symposium	Anostosia Wedte
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium 9. Assignment in the foresaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Particulars of the financial support	b) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture d) Others, if any specify
University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium	
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct	-NIL -
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue	OFFICE OF THE REGISTRAP
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University	OFFICE OF THE REGISTRAP KLE Academy of Higher Education
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed	OFFICE OF THE REGISTRAP KLE Academy of Higher Education
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National	OFFICE OF THE REGISTRAP KLE Academy of Higher Education
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed	OFFICE OF THE REGISTRAP KLE Academy of Higher Education
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 1. Particulars of the organizers of the effective state of the organizers of the organizers of the effective state of the organizers o	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022 Inward No
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 1. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022 Inward No
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 1. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022 Inward No
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 1. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022 Inward No
during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed f) Level of Conference State / Zonal / National Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. 1. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program c) Place	OFFICE OF THE REGISTRAP KLE Academy of Higher Education Research, BELAGAVI 1 2 SEP 2022 Inward No



(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification (1951-19/2000-U.3(A))

ment of Anacsthe

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND CONFERENCES OUTSIDE INDIA

(To be submitted to the Univers	sity through the concerned HoD & Principal)
A. To be filled by the faculty member:	and agriffing concerned HoD & Principal)
1. Name	Dr. Paleale & Mare
2. Qualification	Dr. Rajesh S. Mane M.D. DNB Competheria
3. Designation	Dala sold Capacities of
4. Department	Prefessor, 400 Agasthesiology
5. Institution	
6. Date of joining the Institution	J.N. Medical Collage, Belg.
7. Objectives of the Conference / Seminar / Symposium	04-12-1997
Benefits to be derived from participation in the afores Conference / Seminar / Symposium	
Assignment in the aforesaid Conference / Seminar / Symposium	nional field address / Orations /
1 At inches	C) Chairing a scientific paper
existe Bills + Upuchers	c) Chairing a scientific session d) International collaboration exchange program
in X	(only on invitation)
	e) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	f) Others, if any, specify.
 Particulars of the financial support extended by University to attend the International Conference during the block period of three years (1st January 13t December) 	uary (orace)"
a) Title of the Conference / Seminar / Symposium	OFFICE OF THE REGISTRAR
b) Date of conduct	& Research, BELAGAVI
b) Date of conduct	
d) Financial support extended by the University	S 0 6 OCT 2022
e) Copy of the sanction letter to be enclosed	7
Particulars of the organizers of the afores Conference / Seminar / Symposium	Inward No. 38 Inward No. 38
a) Name of the Organizer	Asian Society of Pediatre 4
b) Title of the program 2022	J A010(1)9 E
c) Place	ASPA-2022,
033 class	1 Stanby), Tyrkey
	14 to 16 Oct 2022 (30ms)
e) Date of Conference f) Financial grant sought	14-16.0ct 3022
1	30,000 2 :22
July 1	
6.50	Ja discuss william of

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KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND CONFERENCES OUTSIDE INDIA

	through the concerned HoD & Principal)
1. Name	0 . 11
2. Qualification	Dr Harpreet Kour
3. Designation	Ph.D. Mederal Physiology
4. Department	Ph.D. Medeid Physiology Associate Professor
5. Institution	Physiology
6. Date of joining the Institution	Towodratal Nohro Medial College.
7. Objectives of the Conference (2)	01-08-2013.
7. Objectives of the Conference / Seminar / Symposium	T. 1
 Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium 	Please enclose a separate sheet.
OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI 6 4 JAN 2023	a) Delivering Key-note address / orations / plenary lectures Plant and a scientific paper c) Chairing a scientific session d) International collaboration exchange program (only on invitation) e) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
Particulars of the financial support extended by the University to attend the International Conference(s) to 31st December) a) Title of the Conference / Seminar / Symposium	-7500d
b) Date of conduct	Internation sports & Energiese Nutrition 208.
c) Venue	Internation sports & Energiese Nutrition 202.
d) Financial support extended by the University	Metropolian Manchoster University, UK
e) Copy of the sanction letter to be enclosed	
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizers	Enclosed Ry KAHER Non-23 10-312246; dated 19th Dec 20th
a) Name of the Organizer	
b) Title of the program 1 3 JAN 2023	Institutio of Sports of Intertan olyppic Comette.
c) Place	Intento Sports & Encuse Nuther 20 26
d) Duration Inward No. 00 U.Sign	Institute of Sports of Intertion objects tomethe. Intertion Sports & Encuse Nutrition 20 22 Morchaster Michopulian Universe , UK
e) Date of Conference	adys.
Financial grant sought	17th 2 20th Dec 2026
1 Horas	1,57,18/-
1.25	(Detaled Expenses



KINEMEDEN EN ERSIT

Dale 41/1/2022

Mineni Gorensic Medicine

(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1977 vide 1979 nment of India Notification No. 54-1972000 U.S.)

श्रीताः र	The second secon
A. To be filled by the faculty member:	· ×
1. Name	Dr. Accountekhar . S. Pijar
2. Qualification	Dr. Somahekhar. S. Pujar. MBBS. MD. Forensic Medic
3. Designation	Professor.
4. Department	forensic Medicine & Toxicolog
5. Institution	
6. Date of joining the Institution	Josephalal Netro Med. college
7. Objectives of the Conference / Seminar / Symposium	Collaborative forenics.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
 Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) 	Al. I
a) Title of the Conference / Seminar / Symposium	18000/
b) Date of conduct	7116
c) Venue	OFFICE OF THE REGISTRAR
d) Financial support extended by the University	KLE Academy of Fligher Education & Research, BELAGAVI
e) Copy of the sanction letter to be enclosed	to (togethor) separate
f) Level of Conference State / Zonal / National	0 7 NOV 2022
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	Inward HoSign.
1. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Dr. Arun M, Professor & Head
	KAMLSION - 2022, Collaborative foren
	JSS Med. College, Mysuru
d) Duration	2 days.
e) Date f) Amount claimed	
f) Amount claimed	7.2012

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Office of the

Date 41/1/2022



KLE UNIVERSIT

(Formerly known as KLE Academy 64 Higher Education & Researcher, Felast [Established under Section 3 of the USC Act, 1956 vide Government of India Notification No.F.9-1972000-0.3(A)]

A. To be filled by the faculty member:	(i) Str.
1. Name	Dr. Ravindra & Honnungar.
2. Qualification	MBBS, MD. forensic Medica
3. Designation	Professor & Head.
4. Department	Dept of forensic Med& Toxicology
5. Institution	Jacoahaulal Nehou Med College.
6. Date of joining the Institution	7m July 2007
7. Objectives of the Conference / Seminar / Symposium	Collaborative forenici.
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	NIL.
a) Title of the Conference / Seminar / Symposium	
b) Date of conduct	
c) Venue	(8,000)
d) Financial support extended by the University	
e) Copy of the sanction letter to be enclosed	
f) Level of Conference State / Zonal / National	
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Do Aron M.
b) Title of the program	. KAMLSCON-22 Colaborative forensi
c) Place OF THE REGISTRAR	Mysuru, JSS Med. college
d) Duration KL Acadamy of Higher Education	2 days.
e) Date	25, 26th Nov. 2022.
f) Amount claimed R 7 NOV 2022	
45	n-hundow





(Formerly known as KLE Academy of Higher Education & Research)

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(ND)

[India No.F.9-19/2000-U.3(ND)

[India Notification No.F.9-19/2000-

No. 73 Popular No. 13 10 Popul

			The state of the s
A. T	o be filled by the fac	ulty member:	
1. Na	ame		Dr. Puita Y. Patil
2. Q	ualification		MD (Pathology)
3. De	esignation		
4. De	epartment		Pathologica
5. Ins	stitution		Pathology
6. Da	ate of joining the Institu	ution	J.N. Medical College.
7. Ob	7. Objectives of the Conference / Seminar / Symposium		1417 2017 U
8. Be		om participation in the aforesaid	Health Professions Education Please enclose a separate sheet.
Sy	Assignment in the aforesaid Conference / Seminar / Symposium		b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify
di	niversity to attend	ncial support extended by the the similar Conference (s) calendar year 1 st January to	. 1
a)	Title of the Confere	nce / Seminar / Symposium	Cand
b)	Date of conduct		and and
c)	Venue		30,000
d)	Financial support ex	ktended by the University	July 1
e)	Copy of the sanction	n letter to be enclosed	0"
f)	Level of Conference	e State / Zonal / National	
suppo	: The faculty mem ort to attend <u>one St</u> rence in a calendar	ber is eligible for financial ate / Zonal and one National year.	[6000]-
11. Co	Particulars of the onference / Seminar /	organizers of the aforesaid Symposium	Cont
a)	Name of the Organiz	zer	HIMS, Dehradus- Uttarakh
b)	Title of the program		NCHPE-22 National Conf. of
c)	Place	OFFICE OF THE REGISTRAR	Debudun Debudun
d)	Duration	KLE Academy of Higher Education 8. Research, BELAGAVI	og days
e)	Date		2 nd + 3rd xear 2022
f)	Amount claimed	7 4 OCT 2022	0
		Inward NoSign	Jesemon Fo
			10 20 1111





& Research Court

(Formerly known as KLE Academy of Higher Education & Research College, Belay [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

	. ,
A. To be filled by the faculty member:	
1. Name	Dr. SHIVASWAMY M.S.
2. Qualification	MD Community Mediane
3. Designation	Professor
4. Department	
5. Institution	Community Medicine
6. Date of joining the Institution	IN. Medical College, Belogan
7. Objectives of the Conference / Seminar / Symposium	There: Pecelynathe human connection
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	There: Perselving the human connection are of Technological Advances in medium Please enclose a separate sheet. to present a packer
Assignment in the aforesaid Conference / Seminar / Symposium	and to get latest updates in medical saluration a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December) — 2022	OFFICE OF THE REGISTER OF
a) Title of the Conference / Seminar / Symposium	KLE Academy of Higher Education & Research, BELACAVI
b) Date of conduct	11.1 OCT 2022
c) Venue	11.1 UCT 2022
d) Financial support extended by the University	Inward No
e) Copy of the sanction letter to be enclosed	1 18
f) Level of Conference State / Zonal / National	Mica II
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	(6000)
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	Swami Rama Himalyan University with AHPE of FAIMER USA
a) Name of the Organizer	THINK, USH
b) Title of the program	NCHPE-2022 13th National Confedence
c) Place	On Health Professions Solucation
d) Duration	Himalayan Institute of medical Sciences Swami Roma Himalayan University Tetradus
e) Date	9:000.1
f) Amount claimed	2-3 Nov-2022
- Knim	Al Poh





(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

A. To be filled by the faculty member:	
1. Name	DR. MANASI GOSAVI
2. Qualification	MD PATHOLOGY
3. Designation	PROFESSOR
4. Department	PATHOLOGY
5. Institution	JNMC
6. Date of joining the Institution	20/6/12
7. Objectives of the Conference / Seminar / Symposium	Annual National Conference
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	- Mil mall
a) Title of the Conference / Seminar / Symposium	8000/11
b) Date of conduct	4
c) Venue	News and the second sec
d) Financial support extended by the University	OFFICE OF THE REGISTRAR WILE Academy of Higher Education
e) Copy of the sanction letter to be enclosed	& Research, BELAGAVI
f) Level of Conference State / Zonal / National	1 5 DEC 2022
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference in a calendar year.</u>	36 sign
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Indian Association of Pathalogist's & Michaeliologis Tom Annual National Conference
b) Title of the program	70th Annual National Conference
c) Place	Banyalore
d) Duration	3 days
e) Date .	2 rd -4 th December 2022
f) Amount claimed	Re 16800/-



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

(To be submitted		igh the concerned HoD & Principal)
A. To be filled by the faculty men	nber:	
1. Name		DR. Jang Bahadur Basad
2. Qualification		Ph.D.
3. Designation	/T 4 4 19819	Associate professor
4. Department		Epidemiology on of Qualitatistics
5. Institution		Epidemiology and Biostatistics KLE Academy of Ligher Educational Rese
6. Email ID		jbiips12 @gmail.com
7. Date of joining the Institution	***************************************	1st Feb 2019
8. Objectives of the Conference / So	eminar / Symposium	Conference (Ora) research paper pasortely
9. Benefits to be derived from partic Conference / Seminar / Symposi	cipation in the aforesaid um	Please enclose a separate sheet. Advantioned of self, department and university
10. Assignment in the aforesaid Con Symposium	nference / Seminar /	a) Contributing a scientific paper (poster or orall) b) Delivering a guest lecture c) Others, if any, specify. Aftended Online
11. Particulars of the financial sup by the University to attend (s) during the current calend 31st December)	the similar Conference	No. Reg few - 3000 Membership few - 6000 Scardinged - 9000
a) Title of the Conference / Se	minar / Symposium	Indian Association for the study of population
b) Date of conduct		1-3 Dec 2022
c) Level of Conference (State	/ Zonal / National)	National
d) Venue		Udaipur, Rayesthan
e) Financial support extended	the electric services of the s	
f) Copy of the sanction letter t	to a company and in a company canada a color one company of the bit of the state of	405
Note: The faculty member is support to attend one State / Zo Conference in a calendar year.	eligible for financial onal and one National	(18000/JL
12. Particulars of the organizers Conference / Seminar / Sympo	of the aforesaid osium	
a) Name of the Organizer		PRC, Mohanla/ Sukhadia Vniversity, Vdayn
b) Title of the program OFFIC	E OF THE REGISTRAR	4300 Annola Conference of the IASP
c) Place KLE Ac	edsmy of Higher Education	Vdaipur, Royasthan
d) Duration	Research, BELAGAVI	1-3, Dec, 2022 (Three days)
e) Date	8 5 DEC 2022	Dec. 1-3, 2622
f) Amount claimed .	22	9000/
inward	NoSign	1 -001





KLE ACADEMY OF HIGHER EDUCATION AND RESEARC (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to	the University through the concerned HoD & Principal)	9
. To be filled by the faculty member:		
1. Name	Dr. Manisha S. Morls	
2. Qualification	M.B.B.S., M.S. Anatomy	
3. Designation	Associate Professor	
4. Department	Anatomy	
5. Email ID	manisham togale @ yahoo.co.	en
6. Institution	J. N. Medical College, Belagavi.	
7. Date of joining the Institution (the facult complete minimum one year of service to	Ity should 98-06-2012	
8. Objectives of the Conference / Seminar	ar / Symposium Global Congress of Anatomish 469th NAT	CO
Benefits to be derived from participation Conference / Seminar / Symposium	on in the aforesaid Please enclose a separate sheet Yes cufached	
10. Assignment in the aforesaid Conferent Symposium	plenary lectures	
. Hill	c) International collaboration exchange program (only on invitation)	Additioners
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)	tuniharpas des sätthermenda per Grad
	e) Others, if any, specify.	Prices "medices a
a) Title of the Conference / Seminar b) Date of conduct c) Level of Conference	8 th to 11th Dec. 2022 Anato	m
 d) Quantum of financial grant eligible expenses, whichever is less) 	ele (or actuals State Level : Rs. 8,000/-	
e) Venue	GIMB, Gadag, Karnataka.	
f) Copy of the sanction letter along- be enclosed	-with Brochure to - Yes - attached	
Note: The faculty member is eligible for financial	I support to attend one State / Zonal and one National Conference in a calendar year	1
12. Particulars of the financial surextended by the University	ipport previously — Nil — 8000	K
a) Name of the Organizer b) Title of the program		V
The state of the s	OFFICE OF THE PEGISTRAIS KLE Academy of Higher Education & Research, BELAGAVI	al.
f) Financial grant availed	2 2 DEE 2022 Perryling	w
le le	Inward No. 12 Sign	/



ELE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

		and the defice med flob & Philicipal)
A. To be filled by the	faculty member:	
1. Name		Karl and the Market
2. Qualification		Kashanima V- Uppin
3. Designation		
4. Department	To the latest state of the latest states and the latest states are latest states are latest states and the latest states are latest states are latest states and the latest states are latest stat	fectiver
5. Institution		Public Health
6. Email ID		JNMC
7. Date of joining the Ins	stitution	uppin Kashanna @ gmail.com
The second secon	ference / Seminar / Symposium	01/02/2021 Public Health American
	from participation in the aforesaid	Please enclose a separate sheet.
Symposium	oresaid Conference / Seminar /	a) Contributing a scientific paper (poster or oral)b) Delivering a guest lecturec) Others, if any, specify.
by the offisefsity	nancial support already extended to attend the similar Conference ent calendar year 1 st January to	NI.
a) Title of the Confe	erence / Seminar / Symposium	Public Health Aspects of Nutrition
b) Date of conduct		Towards Surfainable of goals
c) Level of Confere	nce (State / Zonal / National)	National National
d) Venue	·	1
e) Financial support	extended by the University	Nikrote
	tion letter to be enclosed	1 00000
ote : The faculty me	ember is eligible for financial	8000
2. Particulars of the or Conference / Semina	ganizers of the aforesaid rr / Symposium	
a) Name of the Orga	nizer	Pept of Community Medicine, Iss medical 41
b) Title of the progra	M And the two processing and the second of t	Perty Studies in Food & E Nithitim , Public Health Aspects of Northism
c) Place	OFFICE OF THE REGISTRAR	7 7 7 7
d) Duration	KLE Academy of Higher Education & Research, BELAGAVI	My sore 2 days XLE Academy of Higher Educ:
e) Date		& Research, SELAGAV
f) Amount claimed	2 4 DEC 2022	8m q 9m Dec 20 ENANCE SECTION
	Inward Nammunian Significant	1 JAN 2023

Inward No.026...Sign.

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KLE UNIVERSI

(Formerly known as KLE Academy of Higher Education & Research)e. Revision of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U-HA)

. To be filled by the faculty member:	
Name	DR. PRASANNA S. JIRLI.
Qualification	MD
3. Designation	Professor
I. Department	Forensic Medican
5. Institution	JNMC, Belagani
6. Date of joining the Institution	15.09.2003
7. Objectives of the Conference / Seminar / Symposium	Collaborative Forensics.
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
9. Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	Nil for callificate
a) Title of the Conference / Seminar / Symposium	and for
b) Date of conduct	1 Nome
c) Venue	6
d) Financial support extended by the University	9-2011/1
e) Copy of the sanction letter to be enclosed	(C000 7 N)
f) Level of Conference State / Zonal / National	
Note: The faculty member is eligible for financia support to attend <u>one State / Zonal</u> and <u>one Nationa Conference</u> in a calendar year.	KLE Academy of Higher Education 8. Research, DELACAVI
11. Particulars of the organizers of the aforesald Conference / Seminar / Symposium	. 2 NOV 2022
a) Name of the Organizer	22
b) Title of the program	Inward No.
c) Place	
d) Duration	
e) Date	550
f) Amount claimed	pundan





(Former Jack MEDICAL ROLL Editive sity)
[Deemed-to-be-university BELLANGE u/s 3 of the UGC Act, 1956]

(To be submitted to the University through the concerned Hon & Principal CES

A. To be filled by the	faculty member:	inward	AACT		VERS	
1. Name		Sign			No. 1	/0/
2. Qualification	· ,	/	Zar. AN	HAPURI	VA. KAR	THE
3. Designation	and the same of th		1373, 10	114	ו זיין ייין	<u>L</u>
4. Department			Lection	24		
5. Institution			Public	Health.		
6. Email ID			J. N.	nedical	tollega	
7. Date of joining the Ins	titution		- In augus	- Kari	@ amail	a Cons
8. Objectives of the Con	ference / Seminar /	0	04-4-0	2016	Small	CON
Conference / Seminar	from participation in / Symposium	the aforesaid	Climate c	large : A e a separate sh	Public H	ealth T
Assignment in the afo Symposium Particulars of the fine by the University to			Contributing Delivering a Others, if an	guest lecture	per (poster or c	pral)
by the II :	attend the area	ady extended				
(s) during the currer 31st December)	nt calendar year 1	" January to	H			
(s) during the currer 31st December) a) Title of the Conference	nt calendar year 1	" January to	14			
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct	nt calendar year 19	mposium	74			
(s) during the currer 31st December) a) Title of the Conference b) Date of conduct c) Level of Conference	nt calendar year 19	mposium	74"			
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct c) Level of Conference d) Venue	ence / Seminar / Syr	mposium ational)	<i>H</i> '			
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct c) Level of Conference d) Venue e) Financial support e	ence / Seminar / Syr ee (State / Zonal / Na	mposium ational)	<i>H</i>			
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio	ence / Seminar / Syr ee (State / Zonal / Na extended by the University of the Univer	mposium ational)			The state of the s	
(s) during the currer 31st December) a) Title of the Confer b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorport to attend one Set	ence / Seminar / Syr ee (State / Zonal / Na extended by the University of the Univer	mposium ational) ersity		1800°		
(s) during the currer 31st December) a) Title of the Confer b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanction te: The faculty memorate to attend one Stanference in a calendar y	ence / Seminar / Syree (State / Zonal / National letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the letter to be enclosed by the University of the University	mposium ational) ersity ed or financial ne National				
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorate to attend one Stanference in a calendar y Particulars of the orga Conference / Seminar / a) Name of the Organiz	ence / Seminar / Syrence / Seminar / Syrence / Seminar / Syrence / State / Zonal / National / Natio	mposium ational) ersity at financial at National	James and American	- \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
(s) during the currer 31st December) a) Title of the Conferce b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorate to attend one Stanference in a calendar y Particulars of the orga Conference / Seminar / a) Name of the Organiz	ence / Seminar / Syrence / Seminar / Syrence / Seminar / Syrence / State / Zonal / National / Natio	mposium ational) ersity at financial at National	James and American	- \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		y (AEM
(s) during the currer 31st December) a) Title of the Confer b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorate to attend one Stanference in a calendary Particulars of the orga Conference / Seminar / a) Name of the Organiz	ence / Seminar / Syr ence / Seminar / Syr e (State / Zonal / Na extended by the University of letter to be enclosed liber is eligible for ate / Zonal and on year. nizers of the afores Symposium er Office Of THE RE KLE Academy of High-	mposium ational) ersity ed r financial ne National said A GISTRAR	meta W	Shwa Pic		y (Asm
(s) during the currer 31st December) a) Title of the Confer b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorate to attend one Stanference in a calendary Particulars of the orga Conference / Seminar / a) Name of the Organiz	ence / Seminar / Syrence / Seminar / Syrence / Seminar / Syrence / State / Zonal / National / Natio	mposium ational) ersity ed r financial ne National said A GISTRAR r Education RGAVI	meëta Vi êmate Chan Kochi, Ke	Shwa Pic		of CARM. Threa
(s) during the currer 31st December) a) Title of the Confer b) Date of conduct c) Level of Conference d) Venue e) Financial support e f) Copy of the sanctio te: The faculty memorate in a calendar y Particulars of the orga Conference / Seminar / a) Name of the Organiz b) Title of the program c) Place	ence / Seminar / Syr ence / Seminar / Syr e (State / Zonal / Na extended by the University of letter to be enclosed liber is eligible for ate / Zonal and on year. nizers of the afores Symposium er Office Of THE RE KLE Academy of High-	mposium ational) ersity ed r financial ne National said GISTRAR CU r Education AGAVI	meëta Vi êmate Chan Kochi, Ke	Shwa Pic		of CAEM





(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

A. To be filled by the faculty member:	
1. Name	Dr. Chaitanya Kauat.
2. Qualification	MBBS MD DA
3. Designation	PROFESSOR
4. Department	
5. Institution	Anaesthesiology. JNMC, Belagavi
6. Date of joining the Institution	7-11-2013
7. Objectives of the Conference / Seminar / Symposium	A TOTAL PROPERTY OF THE PROPER
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Medical Education. Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	Nil Wall Verse
a) Title of the Conference / Seminar / Symposium	
b) Date of conduct	
c) Venue	
d) Financial support extended by the University	OFFICE OF THE REGISTRAR
e) Copy of the sanction letter to be enclosed	REE Academy of Higher Education
f) Level of Conference State / Zonal / National	- 15 OCT
Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year.	Inverd No.
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	4.43.02
a) Name of the Organizer	Himalayan Instituted medical Sciences SRHUniverent Debradur
b) Title of the program 131	Thatoual conference on hearth
c) Place	Dehradun
d) Duration	4 days.
e) Date	215+201-1-0001
f) Amount claimed	31 October to 3 November 200
No. 526 Date. 13 110/22	Aspender Fo



KLE ACADEMY OF HIGHER FOUCATION AND RESLARGE

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

Α. ΄	То	be	filled	by	the	faculty	member:
------	----	----	--------	----	-----	---------	---------

- 1. Name
- 2. Qualification
- 3. Designation
- 4. Department
- 5. Institution
- 6. Email ID
- 7. Date of joining the Institution
- 8. Objectives of the Conference / Seminar / Symposium
- 9. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium
- Assignment in the aforesaid Conference / Seminar / Symposium
- 11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December)
 - a) Title of the Conference / Seminar / Symposium
 - b) Date of conduct
 - c) Level of Conference (State / Zonal / National)
 - d) Venue
 - e) Financial support extended by the University
 - f) Copy of the sanction letter to be enclosed

Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year.

12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium

a) Name of the Organizer

-/C Professor and Head Dept. or Epidemiology & Biostatistics

KAHER, BEJARAY

- d) Duration
- e) Date
- f) Amount claimed

OFFICE OF THE REGISTRAR
KLE Academy of Higher Education
& Research, BELAGAVI

14-00 BEC 2022

Inward No.....Sign.....

Dr. Jang Bahadur Basad

Associate Professor

Epidemiology and Biostatistics

KLE Academy of Higher Education and Resear

ibijos 12 @gmail. Com

1st Feb. 2019

oral prasentation

Please enclose a separate sheet.

Advortizement of self, department and university

- a) Contributing a scientific paper (poster or oral)
- b) Delivering a guest lecture

c) Others, if any, specify

4sth Annual National Conference of the ISMS

24-26 Hov, 2022 National

Krishna Institute of Medical statistics, Karad

No Yes

Dr. Kakade S.V.

Karad, Maharashtra 24-26 Nov, 2022 (fredays 24-26 Nov, 2072

DS purport

EPIDEMIQUES BELAGAVI



(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal) A. To be filled by the faculty member: 1. Name DR. SUNITA 2. Qualification MD [Pathology] 3. Designation 4. Department 5. Institution N. Medical College 6. Date of joining the Institution 14/7/2017. 7. Objectives of the Conference / Seminar / Symposium Annual Halional Conference of Indian Asson of Patholy Minoleppy. 8. Benefits to be derived from participation in the aforesaid Please enclose a separate sheet. APCON-22 Conference / Seminar / Symposium 9. Assignment in the aforesaid Conference / Seminar / a) Chairing a scientific session. Symposium b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify. 10. Particulars of the financial support extended by the 08000) University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) a) Title of the Conference / Seminar / Symposium NCHPE-20 b) Date of conduct 2 nd 4 3rd Nov 2022 c) Venue HIMS, Dehradus, rettackland d) Financial support extended by the University APPLIED'- under Medical Edu e) Copy of the sanction letter to be enclosed Level of Conference State / Zonal / National f) National - Delaits yet tobe Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer KCIAPM = & LAPM b) Title of the proportion OF THE REGISTRAR M. S. Randiah Med. College, Bengaluw. KLE Academy of Higher Education C) Place & Research, BELAGAVI Duration Date 3 days - 2nd - 4th Dec 2022 Amount claimed

inward No.....Sign....



(Formerly known as KLE Academy of Higher Education & Research) [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

A. To be filled by the faculty member:	
1. Name	Dr. Bhagyashni. R. Hungund (30shi)
2. Qualification	MD Party in
3. Designation	MD Pathology Professor
4. Department	
5. Institution	Jn mc
5. Date of joining the Institution	2-1-2007
7. Objectives of the Conference / Seminar / Symposium	
B. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
O. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	Nil. Jedide
a) Title of the Conference / Seminar / Symposium	10 100
b) Date of conduct	The Call O
c) Venue	60% 00
d) Financial support extended by the University	
e) Copy of the sanction letter to be enclosed	OFFICE OF THE REGISTRAN
f) Level of Conference State / Zonal / National	KLE Academy of Higher Education & Research, BELAGAVI
ote: The faculty member is eligible for financial pport to attend <u>one State / Zonal</u> and <u>one National onference</u> in a calendar year.	2 2 OCT 2022
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium of Higher Education	Inward No
or resourch, see a rath	Y VIJENDRA D. CHAUHAN
	3th National Conference on Health Profession El
c) Place 4 JAN 2023 / H	3th National Conference on Health Profession Ed timalayan Institute of Medical Sciences, De has
	2 days.
d) Duration Inward No. 015	Octobry 5.
inward No.O1S Sign.	2-11-2022 & 37-11-2022





(Formerly known as KLE Academy of Higher Education & Research College, Belagan [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

oept. of Community M.

A. To be filled by the faculty member:	
1. Name	DE DEEPTI M. KADEANGAPI
2. Qualification	MBBS, MD Community Madrine
3. Designation	ASSOCIATE PROFESIOR
4. Department	Community Medicine
5. Institution	J. N. Medical college Belagar
6. Date of joining the Institution	12.07.2007
7. Objectives of the Conference / Seminar / Symposium	
8. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	 a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	1 Nil Get phicate
a) Title of the Conference / Seminar / Symposium	
b) Date of conduct	Ø
c) Venue	P OFFICE OF THE REGISTRAR KLE Academy of Higher Education
d) Financial support extended by the University	& Research, BELAGAVI
e) Copy of the sanction letter to be enclosed	11 OCT 2022
f) Level of Conference State / Zonal / National	
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	inward No
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	1600
a) Name of the Organizer	Swami Rama Himalyan university
b) Title of the program	13 WCH PE-2022 13 National Conferen
c) Place	Kimalayan Institute of Hedrical signess
d) Duration	Dehaednun Uttaekhend
e) Date	2nd 3rd wovember 2022
f) Amount claimed	



(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

	2 -
12. Expenses involved towards attending the Conference:	
a) Place	Dehardilhus 111/2011
b) Mode of journey	Road and Air
c) Fare	Hair and And
To and Fro expenses	. 20 000 -
Registration / Delegation Fee	80001-
Accommodation charges	10300
Total Expenses	46.300 -
13. Documents to be submitted:	70,3001
a) Copy of the letter of invitation from the organizers.	
b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Abstreet details and email attached
DECLARA	TION ENVAL ATTEMENT

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Date: 10 10 2022	Signature of the faculty member August M hadenged
Ref. No. 1424	Date: <u>U-10-2021</u>
То	

The Registrar, KLE University. Belgaum.

Dear Sir.

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the Conference for kind consideration.

Thanking you,

Yours faithfully,

Principal RINCIPAL J.N. Medical College,

BELAGAVI- 590 010

To,

Date: 2.12.2022

The Register

KLE Academy of Higher Education and Research

From.

Dr Deepa R Mane, MDS, PhD

Professor

Department of Oral Pathology & Microbiology

KLE VK Institute of Dental Sciences

KLE Academy of Higher Education and Research

Through Proper Channel

Respected Sir.

I undersign Dr Deepa Mane Professor in the department of Oral Pathology, KLE VK Institute of Dental Sciences has been awarded for Best Article Award at 29th National IAOMP conference held at Dehradun on 11th, 12th & 13th Nov 2022.

As per the letter ref no KAHER/2022-23/D-28112218 herewith attached my certificate of Best Article Award, Photos and other required documents as per the university rules. Kindly do the needful and oblige. Bet permission

Thanking You

Yours Sincerely.

Dr Deepa R Mane.

morded coveridadio

Professor and Head

Department of Oral Pathology, KLE V. K. Institute of Dental Sciences, Belagayi

0 3 DEC 2022

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)
Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category (4)

redited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 01022313

25th January, 2023

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned principal

and HoD J N Medical College, Belagavi.

With reference to the above, the request of Dr.Abhilasha Sampagar, Professor, Department of Medical Oncology, J N Medical College Belagavi. For attending '25th Annual Conference of the Pediatric Hematology Oncology Chapter (PHOCON 2022)' to be held AIIMS and the India Habitat Centre, New Delhi, from 18th to 20th November, 2022. Has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University * BELAGAN *

of. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, J N Medical College, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



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[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

A. To be filled by the faculty member:	
1. Name	Dr Abrilaska S.
2. Qualification	MD (Pedlatrica), FPHO
3. Designation	Professor
4. Department	Medical Douglass
5. Institution	Medical Oncology. KAHER'S JNMC.
6. Email ID	abhilasha. pedia @gmail. com
7. Date of joining the Institution	1 st June 20/2
8. Objectives of the Conference / Seminar / Symposium	
Benefits to be derived from participation in the afore Conference / Seminar / Symposium	
Assignment in the aforesaid Conference / Seminar Symposium	/ Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
 Particulars of the financial support already exter by the University to attend the similar Conferct (s) during the current calendar year 1st Januar 31st December) 	anco
a) Title of the Conference / Seminar / Symposium	PHOCON (National).
b) Date of conduct	18th, 19th, 20th November 2012
c) Level of Conference (State / Zonal / National)	National
d) Venue	New Delhi
e) Financial support extended by the University	1/2
f) Copy of the sanction letter to be enclosed	111001
Note:The faculty member is eligible for finan support to attend <u>one State / Zonal</u> and <u>one Natio</u> conference in a calendar year.	cial nal
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Or Rachna Sch (AIIMS, New Da
b) Title of the program	PHOLON Padinker Hamile 1 - 8
c) Place OFFICE OF THE REGISTRAR	THOIA HABITAT (ENTRE (New Della
d) Duration KLE Academy of Higher Education & Research, EELAGAVI	3 days.
e) Date	18H, 19H, 20th November 2012
f) Amount claimed 2 3 JAN 2023	10 117 120 14000000000000000000000000000000000
Inward NoSign	Arper Noon

FACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

expenses involved towards attending the Conference:	
a) Place	Pa 20,000
b) Mode of journey	Rs 20,000 Flight (An Wavel).
o) Fare	Tight LAN Mavel).
To and Fro expenses	(Pa 900 mg)
Registration / Delegation Fee	(Re 20000)
Accommodation charges	(Rs 5500)
Total Expenses	R 20,000
. Documents to be submitted:	45500
a) Copy of the letter of invitation from the organizers.	
b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Date : / 8/1/23	
-----------------	--

Ref. No. 2362

Signature of the faculty member Allia Lu.

To

The Registrar, KAHER,

Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Dr. Rohan Bhise Consultant Medical and Hematooncologist

KMC Reg. No. 68179 Signature of the Hop

Yours faithfully, Seal

Paledical College Jawaharia

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)
Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A

redited A Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 23012319



18th January, 2023

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter received from concerned applicant.

With reference to the above, the request of Dr.V.A.Kothiwale, Professor and Registrar, of KLE Academy of Higher Education and Research, Belagavi. For attending '78th Annual conference of Association of Physicians of India' to be held Ahmedabad from 26th to 29th January, 2023 has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University

* BELAGNI*

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Finance Officer, KAHER, Belagavi.

LE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

A. To be filled by the faculty member:		
1. Name	Dr.V.A.Kothiwale	
2. Qualification	MD,FICC,FICP,Ph.D.	
3. Designation	Registrar and Professor	
4. Department	- %	
5. Institution	KLE Academy of Higher Education and Research, Belagavi.	
3. Email ID	Nov10kothiwale@yahoo.co.in	
7. Date of joining the Institution	October,1986	
3. Objectives of the Conference / Seminar / Symposium		
9. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.	
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Contributing a scientific paper (poster or oral)b) Delivering a guest lecturec) Others, if any, specify.	
11. Particulars of the financial support already extended by the University to attend the similar	Nil	
Conference (s) during the current calendar year 1 st January to 31 st December)		
January to 31 st December) a) Title of the Conference / Seminar / Symposium	- (, , , ,)	
January to 31 st December)	- 16000	
January to 31st December) a) Title of the Conference / Seminar / Symposium	10001/	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct		
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National)	- (0	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue	- (0	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University	- (0)	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National	- (0)	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed lote: The faculty member is eligible for financial support to attend one State / Zonal and one National conference in a calendar year. 2. Particulars of the organizers of the aforesaid	-	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed lote: The faculty member is eligible for financial support to attend one State / Zonal and one National conference in a calendar year. 2. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	-	
January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed lote: The faculty member is eligible for financial support to attend one State / Zonal and one National conference in a calendar year. 2. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer	-	
January to a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed lote: The faculty member is eligible for financial support to attend one State / Zonal and one National conference in a calendar year. 2. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program		
January to a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference (State / Zonal / National) d) Venue e) Financial support extended by the University f) Copy of the sanction letter to be enclosed lote: The faculty member is eligible for financial support to attend one State / Zonal and one National conference in a calendar year. 2. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program c) Place		



KLE ACADEMY OF HIGHER EDUCATION AND RESE (Formerly known as KLE University)

EMPOWERING PROFESSIO	[Deemed-to-be-University establish	shed u/s 3 of the UGC Act 19561
13. Exp	penses involved towards attending the Conference:	17.00, 1930
a)	Place	Ahmedabad
b)	Mode of journey	
c)	Fare	By Air
	To and Fro expenses	6
	Registration / Delegation Fee	
	Accommodation charges	
	Total Expenses	
14. Do	cuments to be submitted:	
a) b)	Copy of the letter of invitation from the organizers. Copy of the full text of documents / abstract / paper	
	prepared by the applicant for presentation.	
	DECLARA	TION
11	hereby declare that :	
	• I have furnished the information in this application which	
	 I am not getting any financial assistance / support from agency for attending the aforesaid Conference, 	the sponsorers of the Conference or any other funding
	 I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe 	erence,
	 I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aformatten and the statement of the faculty 	members of the Department / Institution to share the presaid Conference.
	I shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the amount to the University in excess of the shall reimburse the shall	of the eligibility.
Date : _	16/01/2023	Signature of the faculty member

Ref. No	D	Date:
То		
The Re		
Belgaur		
Dear Si	ir,	
	We are enclosing herewith the application of the ab	ove Teacher in the prescribed format for grant of
	al support for presentation scientific paper (poster o	_
	ence for kind consideration.	
	Thanking you,	
		Yours faithfully,
	Seal	
Signatu	re of the HoD	Principal

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

	CONFERENCES			•
Application ttps://flixirsolutions.com/fin_ass	sist/index_php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	UTIONS.COM/FIN_ASSIST/INDE	EX.PHP/CORE/ASS_LIST)
Final Approved List https://flixirsolutions.com/fin_ass	A. To be filled by the faculty sist/index.php/Core/claimed_report) 1. Employee ID	member:	3. Qualification	4. Designation
D llcor Mactor		Prashant Annappa Karni	MDS	Teaching Staff
	101112155 sist/index.php/Core/User_page)		-1	
Bank Details	5. Department sist/index.php/Qgre/Bank அள்ளு	6. Institution KLE VK Institute Of Deni	7. Email Id prashantkarni@yahoo.cc	8. Date of joining the Institution
Change Password	"	THE VICINGUIGO OF BUILD	prasnanikanni@yanoo.oc	15-05-2013
	sist/in dex.php/Core/changepass) B. Particulars and assignme	ent in the conference:		· · · · · · · · · · · · · · · · · · ·
Logout	sist/index.phg/Sparatodation tageathnfo Symposium Evolution Revolution Innova	erence / Seminar /	View File (https://flixirsolutions.com/fil 978d3 PCC 16 LETTER.jp	
	2. Benefits to be derived aforesaid Conference / Se		Please enclose a separate	
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	3.Assignment in the afore	esaid Conference / Seminar	 a) Delivering key-note address/orations/plenal 	ry lectures
			b) Contributing the scie	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(only	()
			e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	l to discuss
			f) Others. if any, specify	<i>i</i> .
	C.Particulars of the conference being attended	(YES V		
	a) Title of the Conference / Seminar / Symposium	Evolution Revolution I	b) Date of conduct	04-03-2022
	c) Venue	SDM College of denta	d) Financial support extended by the University	Applied 25-02-2022
	e. Quantum of financia eligible	ıl grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File (https://flixirsolutions.c om/fin_assist/uploads/ 162186d42a9fef_PCC 16 LETTER_jpg)		
	Note : The faculty member Conference in a calendar y	is eligible for financial suppo ear.	rt to attend one State / Zonal	and one National

SDM college of Denta

Dharwad

a) Name of the

Organizer

c) Place

b) Title of the

program

d) Duration

Pre convention course

	04-03-2022	f) Financial grant sought		
E. Expenses involved toward	ds attending the Conference	e:		
a) Place	Dharwad			
b) Mode of Journey	(By Road	>)		
Amount in Rs		24		
c) Fare	2000.00	d) To and For exp.	2000.00	
e) Registration /	4720.00	f) Accommodation	5000.00	
Delegation Fee		charges		
g) Other charges	. 15000.00	Total Expenses	28720.00	
F. Documents to be submitte	ed:			
a) Copy of the letter of invita	ition from the organizers,	View File (https://flixirsolutions.com/ acae7_PCC 16 LETTER.j		2186
b) Copy of the full text of do prepared by the applicant for		View File (https://flixirsolutions.com/ accad Abstract-Pre-confe		2186
	DEC	LARATION		
for attending the aforesaid Coi • I shall produce necessary bil University from the date of atte	assistance / support from the nference, is / receipts along-with Attendending the aforesaid Conferen	e sponsorers of the Conference dance / Participation Certificate nce,	e or any other funding	the
 I have furnished the informat I am not getting any financial for attending the aforesaid Coi I shall produce necessary bill University from the date of atternation 	assistance / support from the ference, is / receipts along-with Attendending the aforesaid Conference the benefit of the faculty mer tending the aforesaid Conference to the University in excess of	e sponsorers of the Conference dance / Participation Certificate nce, nbers of the Department / Instite ence. f the eligibility	e or any other funding	the
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AMOUNT CLAIM LIST

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	5900.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	View
3	Accommodation charges	25000	5000.00	<u>View</u>
4	Other charges finance	25000	11200.00	View
	Total	100000	24100	
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		Bank	Details
Sr.No	Bank Name	Acc Holder Name	Acc Number Ifsc Code
1	State Bank of India	DR PRASHANT A KARANI	30781607727 SBIN0008789

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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application https://flixirsolutions.com/fin_assist/ind	dex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/IND	EX.PHP/CORE/ASS_LIST)
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1 Hear Master			3. Qualification	4. Designation
https://flixirsolutions.com/fin_assist/ind	101112140 dex. <u>php/Core/User_page)</u>	Dr.Abhijit Parasharam Pa	MDS	Teaching Staff
Bank Details https://flixirsolutions.com/fin_assist/inc	5. Department	6. Institution KLE VK Institute Of Dent	7. Email Id dr.abhijitpatil85@gmail.c	8. Date of joining the Institution
Change Password			ur.abriji.pauloo@giriail.c	02-06-2014
https://flixirsolutions.com/fin_assist/in	B. Particulars and assign	ment in the conference:		
<u>Logout</u> https://flixirsolutions.com/fin_assist/ind	Symposium		View File (https://flixirsolutions.com/fi 5199d Screenshot 20220;	in_assist/uploads/16215bde5
	Evolution-Revolution-Inn	ovation d from participation in the	Please enclose a separat	
	aforesaid Conference /		Choose File No file chos	
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	3.Assignment in the aformation / Symposium	oresaid Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures
			b) Contributing the sci	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(onl	
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit	d to discuss
			f) Others, if any, specif	у.
	C.Particulars of the conference being attended	(NO V)		
	a) Title of the Conference <i>l</i> Seminar <i>l</i> Symposium	24th IPS PG conventi	b) Date of conduct	04-03-2022
	c) Venue	Dharvad	d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financ eligible	cial grant		· À
	I) State :Rs 8,000/-]	II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member Conference in a calendar	er is eligible for financial suppo year.	rt to attend one State / Zona	l and one National
-	D.Particulars of the organ	nizers of the aforesaid Conferer	nce / Seminar / Symposium	maning A same makender (ACE) (ACE) (ACE) (ACE) (Ace or ACE) (Ace or ACE) (ACE)
) A)	(1 North Control of the Control of th	
	a) Name of the Organizer	Sdm dental collage ,d	b) Title of the program	lps pg convention
	c) Place	Dharwad	d) Duration	(1 V) (Day V)
	e) Date of conference	e 04-03-2022	f) Financial grant	Nil

		sought		
E. Expenses involved towa	rds attending the Confe	rence:		
a) Place	Dharwad			
b) Mode of Journey	(By Road	Walter State Control of the Control		
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mount in Rs c) Fare	0.00	d) To and For e	vn	2000.00
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Documents to be submit	ted:			sseedddaaccagarigarydishdaan
a) Copy of the letter of invi	tation from the organizers			n_assist/uploads/16215bde5 223-100514.jpg)
b) Copy of the full text of d prepared by the applicant t		er View File		
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and experience gained from a land shall reimburse the amour	or the benefit of the faculty attending the aforesaid Co	members of the Departmer onference.		ution to share the knowledge
648		Date :	20-0	2-2022
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	C	Date :	23-0	2-2022
	Name		23-0	Comment
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To The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith the presentation scientific paper	Name ne application of the above	e Teacher in the prescribed	Dr. Veerap	Comment Approved. Need to submit all original bills
Fo The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith th	Name ne application of the above	e Teacher in the prescribed	Dr. Veerag	Comment Approved. Need to submit all original bills or grant of financial support for grant of kind consideration.

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1	Registration / Delegation Fee	25000	4720.00	View
2	To and Fro expenses	25000	2000.00	View
3	Accommodation charges	25000	4000.00	<u>View</u>
4	Other charges finance	25000	0.00	View
	Total	100000	10720	
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		Bank [Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Kotak mahindra bank	DR.ABHIJIT PATIL	3511587145	KKBK0000447

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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/inde	x.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	UTIONS.COM/FIN_ASSIST/INDE	EX.PHP/CORE/ASS_LIST)
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Bank Details (https://flixirsolutions.com/fin_assist/inde		KLE VK Institute Of Den	drmallikarjunhd4@gmail.	Institution
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	Symposium			n_assist/uploads/16215c181
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	2 Panafita to be derived for	rom participation in the	Please enclose a separate	chaot
	2. Benefits to be derived for aforesaid Conference / Se			
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	3.Assignment in the aforest / Symposium	said Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures
			b) Contributing the scie	entific paper
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			e) Panel discussion or talks/lectures or invited arts/skills(only on invited	I to discuss
			f) Others. if any. specify	<i>.</i>
	C.Particulars of the conference being attended	(NO V		
	a) Title of the Conference / Seminar / Symposium		b) Date of conduct	dd-mm-yyyy
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financial eligible	grant	•	p*
	I) State :Rs 8,000/-		ii) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member is Conference in a calendar ye		rt to attend one State / Zonal	and one National
-	D.Particulars of the organize	ers of the aforesaid Conferen	nce / Seminar / Symposium	
	a) Name of the Organizer	SDM dental collage dl	b) Title of the program	24th IPS PG CONVE
	c) Place	Dharwad	d) Duration	(3 V) (Day V)
	a) Data of conference	04-03-2022	f) Financial grant	Nil

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4720.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	View
3	Accommodation charges	25000	4000.00	View
4	Other charges finance	25000	0.00	<u>View</u>
	Total	100000	10720	
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Sr.No	Bank Name	Acc Holder Name	Acc Number	ifsc Code
1	SBI	DODDAMANI MALLIKARJUN H	11070055354	SBIN0002264

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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

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(https://flixirsolutions.com/fin_assist/inde	ex. <u>php/Core/User_page)</u> 5. Department	6. Institution	7. Email Id	8. Date of joini	na tha
Bank Details (https://flixirsolutions.com/fin assist/index		KLE VK Institute Of Deni	dr_msb@rediffmail.com	Institution	ng the
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<u>Logout</u>	B. Particulars and assignme	nt in the conference:			
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	Symposium Evolution-Revolution-Innova	tion	(https://flixirsolutions.com/fir 04a0b Benifits.docx)	<u>assist/uploads/1</u>	6215c1d/
	Evolution-Revolution-Innova	tion			
	Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium		Please enclose a separate	sheet.	
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	3.Assignment in the afore	said Conference / Seminar	a) Delivering key-note address/orations/plenar	y lectures	
			b) Contributing the scie	ntific paper	
			c) Chairing a scientific s	session	✓
			d) International collabor exchange program(only		Constitution of the Consti
			e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	to discuss	
			f) Others. if any. specify	. 7	
	C.Particulars of the conference being attended	(NO V			pognuse AbitHumbro e co nuocidamen
	a) Title of the		b) Date of conduct	dd-mm-yyyy	
	Conference /		•		
	Seminar / Symposium				
	Gymposium			v	
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy	
	e. Quantum of financial eligible	grant			
	I) State :Rs 8,000/-		II) National :Rs 16,000/-		
	f) Copy of the sanction letter to be enclosed	View File			
	Note : The faculty member is Conference in a calendar ye		rt to attend one State / Zonal	and one National	
· ·	D.Particulars of the organize	ers of the aforesaid Conferen	ce / Seminar / Symposium		Laura antiquami
	a) Name of the Organizer	SDM Dental College,	b) Title of the program	24TH INDIAN I	PROST
	c) Place	Dharwad	d) Duration	(3 V)	>
	e) Date of conference	04-03-2022	f) Financial grant	16000	

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4720.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	<u>Viểw</u>
3	Accommodation charges	25000	7168.00	<u>View</u>
4	Other charges finance	25000	2000.00	<u>View</u>
	Total	100000	15888	
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Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code				
1	SBI	MAHNTESH BEMBALAGI	30782934833	SBIN0008789				

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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

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User Master ps://flixirsolutions.com/fin_assist/ind		Dr. Anandkumar Goudar	Masters in Dental Surger	Teaching Staff
	5. Department	6. Institution	7. Email Id	8. Date of joining the
Bank Details ps://flixirsolutions.com/fin_assist/ind		KLE VK Institute Of Den	patilprosth@yahoo.co.in	Institution
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os://flixirsolutions.com/fin_assist/ind	ex.php/Core/changepass) B. Particulars and assignme	ent in the conference:		Man congress
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balgo			c) Chairing a scientific	session
Bills our			d) International collabo exchange program(only	
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			f) Others. if any. specify	
	C.Particulars of the conference being attended	(NO Y		
	a) Title of the	· ·	b) Date of conduct	dd-mm-yyyy
	Conference /			
	Seminar / Symposium			
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member i Conference in a calendar ye	s eligible for financial suppo ear.	rt to attend one State / Zonal	and one National
	D.Particulars of the organiz	ers of the aforesaid Conferer	nce / Seminar / Symposium	
	a) Name of the Organizer	SDM Dental College,	b) Title of the program	24TH INDIAN PROST
	c) Place	Dharwad	d) Duration	(3 v) (Day v)
				The same of the sa

04-03-2022

f) Financial grant

16000

e) Date of conference

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration. Thanking you,

Yours faithfully,

Signature of the HoD Principal

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Application	
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User Master	
Bank Details	

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	5900.00	View
2	To and Fro expenses	25000	2000.00 *	<u>Vĩew</u>
3	Accommodation charges	25000	4200.00	View
4	Other charges finance	25000	2000.00	<u>View</u>
	Total	100000	14100	
			Deny	ADDIOVE

		Bank	Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1		ANANDKUMAR G PATIL	1651530000688	HDFC0000253

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/index	ex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/IND	EX.PHP/CORE/ASS_LIST)
⚠ Final Approved List (https://flixirsolutions.com/fin_assist/index	A. To be filled by the faculty ex.php/Core/claimed_report)	member:	3. Qualification	4 Parlamenti
A Liner Master			,	4. Designation
(https://flixirsolutions.com/fin_assist/inde	ex.php/Core/User_page)	Dr. Veena B Benakatti B:	MDS	Teaching Staff
Bank Details (https://flixirsolutions.com/fin_assist/inde	5. Department ex.php/Qure/Bank (Datais)	6. Institution KLE VK Institute Of Dent	7. Email Id veenak20021@rediffmai	8. Date of joining the Institution
♠ Change Password			voorian2002 (@rodininar	22-09-2016
(https://flixirsolutions.com/fin_assist/inde	ex.php/Core/changepass)			
<u> Logout</u>	B. Particulars and assignme	nt in the conference:		
(https://flixirsolutions.com/fin_assist/inde	ex.php/Garatedation tagoot)nfe Symposium	rence / Seminar /	View File	
	"Evolution-Revolution-Innova	ation" In Prosthodontics	5fe6c_Benefits.docx)	n_assist/uploads/162172217
	2. Benefits to be derived fi		Please enclose a separate	sheet.
	aforesaid Conference / Se	minar / Symposium	Choose File No file chose	an
	0.4			
	3.Assignment in the aforest / Symposium	said Conference / Seminar	 a) Delivering key-note address/orations/plena 	ry lectures
			b) Contributing the scie	ntific paper
			c) Chairing a scientific	session
			d) International collabor exchange program(only	1 1
			e) Panel discussion or t talks/lectures or invited arts/skills(only on invita	to discuss
			f) Others. if any. specify	
	C.Particulars of the conference being attended	(NO V		
	a) Title of the Conference / Seminar / Symposium		b) Date of conduct	dd-mm-yyyy
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financial eligible	grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member is Conference in a calendar yea		t to attend one State / Zonal	and one National
	D.Particulars of the organize	rs of the aforesaid Conferen	ce / Seminar / Symposium	
		7		
	a) Name of the Organizer	SDM Dental College a	b) Title of the program	24th IPS PG Conventi
	c) Place	Dharwad	d) Duration	(3 v) (Day v)
	e) Date of conference	04-03-2022	f) Financial grant	16000

Welcome finance

Application

B Final Approved List

User Master

Bank Details

Change Password

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4720.00	<u>View</u>
2	To and Fro expenses	25000	3000.00	<u>View</u>
3	Accommodation charges	25000	5000.00	<u>View</u>
4	Other charges finance	25000	3000.00	<u>View</u>
	Total	100000	15720	
			Dany	ADMIN.

		Bank D	etails	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	RANI CHANNAMMA MAHILA SAHAKARI BANK NIYAMIT BELAGAVI	VEENA BENAKATTI	3002300003378	IBKL0101BZR

₹Velcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

<u>Application</u> (https://flixirsolutions.com/fin_assist/ind	lex.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASSIST/INDI	EX.PHP/CORE/ASS_LIST)
Einal Approved List (https://flixirsolutions.com/fin_assist/ind	A. To be filled by the faculty	member:		
495 - 1 I 1 M 4 - u		2. Name	3. Qualification	4. Designation
User Master (https://flixirsolutions.com/fin_assist/ind	. 101112162 lex. <u>php/Core/User_page)</u>	Aditya Ramnarayan Ach	MDS	Teaching Staff
Bank Details	5. Department	6. Institution	7. Email Id	8. Date of joining the
(https://flixirsolutions.com/fin_assist/ind	lex.php/Qare/Bank_Dateila)	KLE VK Institute Of Deni	adiacharya123@gmail.co	Institution 27-08-2014
Change Password	Journal Corolabanas accel			27-00-2014
(https://flixirsolutions.com/fin_assist/ind	B. Particulars and assignment	ent in the conference:		
Logout (https://flixirsolutions.com/fin_assist/ind	dex.php/Gara/adminf legout)nfe	erence / Seminar /	<u>View File</u>	
	Symposium		(https://flixirsolutions.com/fi	n_assist/uploads/16218 7 4c
	Evolution-revolution-innovation	ion	13d3d To- Aditya.docx)	
	2. Benefits to be derived to		Please enclose a separate	sheet.
	aforesaid Conference / Se	eminar / Symposium	Choose File No file chose	en .
	3.Assignment in the afore / Symposium	esaid Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures
			b) Contributing the scie	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(onl	LJ
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit	I to discuss
			f) Others. if any. specify	<i>J</i> .
	C.Particulars of the conference being attended	(NO Y)		
	a) Title of the Conference / Seminar / Symposium	24th national indian pi	b) Date of conduct	04-03-2022
	c) Venue	SDMCDS, Dharwad K	d) Financial support extended by the University	Nil dd-mm-yyyy
	e. Quantum of financia eligible	l grant		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member Conference in a calendar y	is eligible for financiał suppo ear.	ort to attend one State / Zona	l and one National
Ī	D.Particulars of the organiz	ers of the aforesaid Confere	nce / Seminar / Symposium	
	a) Name of the Organizer	Indian Prosthodontic 5	b) Title of the program	24th National IPS PG
	c) Place	SDMCDS, Dharwad K	d) Duration	(3 v) (Day v)
	e) Date of conference	04-03-2022	f) Financial grant	16000

		sought		
E. Expenses involved towar	ds attending the Conferen	ce:		
a) Place	Dharwad			
b) Mode of Journey	By Road	~)		
b) mode of bourney	Бутоац		-	4
Amount in Rs				
c) Fare	0.00	d) To and For ex	p.	2000.00
e) Registration /	4851.00	f) Accommodation	on	5000.00
Delegation Fee	4031.00	charges	011	3000.00
g) Other charges	0.00	Total Expenses		11851.00
. Documents to be submitt	ed:			
a) Copy of the letter of invit	ation from the organizers,	<u>View File</u> (<u>https://flixirsolutions</u> 1469a_Dr, Aditya Ad		<u>assist/uploads/1621874d</u> . <u>pdf)</u>
b) Copy of the full text of do prepared by the applicant f		View File (https://flixirsolutions 14e10_PCC 16 LET		assist/uploads/1621874d ⁻ al.jpg)
	DE	CLARATION		
or attending the aforesaid Co	lls / receipts along-with Atter	ndance / Participation Cer		
or attending the aforesaid Co I shall produce necessary bi University from the date of att I shall conduct a seminar for and experience gained from a I shall reimburse the amoun	onference, Ils / receipts along-with Atter rending the aforesaid Confer r the benefit of the faculty me attending the aforesaid Confer t to the University in excess	ndance / Participation Cere ence, embers of the Department erence. of the eligibility	tificate wit	thin fifteen days to the
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for attending the aforesaid Co I shall produce necessary bi University from the date of att I shall conduct a seminar for and experience gained from a I shall reimburse the amoun	onference, Ils / receipts along-with Atter tending the aforesaid Confer the benefit of the faculty me attending the aforesaid Confer t to the University in excess and conditions Con	ndance / Participation Cerence, embers of the Department erence. of the eligibility Date:	tificate wit / Institutio	thin fifteen days to the on to share the knowledge
To resentation scientific paper of the Registrar, We are enclosing herewith thoresentation scientific paper of the resentation scientific	enference, Ils / receipts along-with Atter rending the aforesaid Confer the benefit of the faculty me attending the aforesaid Confer to the University in excess and conditions Con Name	ndance / Participation Cerence, embers of the Department erence. of the eligibility Date: nments	Institution 25-02-	thin fifteen days to the on to share the knowledge 2022 Comment Approved. The a incentives will be released after the submission of original bills.
or attending the aforesaid Co I shall produce necessary bi University from the date of att I shall conduct a seminar for and experience gained from a I shall reimburse the amoun Accept terms	enference, Ils / receipts along-with Atter rending the aforesaid Confer the benefit of the faculty me attending the aforesaid Confer to the University in excess and conditions Con Name	ndance / Participation Cerence, embers of the Department erence. of the eligibility Date: nments	'Dr. Veerappa	comment Approved. The incentives will be released after the submission of original bills.
or attending the aforesaid Coll shall produce necessary by Jniversity from the date of attending the saminar for and experience gained from a shall reimburse the amount Accept terms To The Registrar, KAHER, Belgaum. Dear Sir, We are enclosing herewith the presentation scientific paper of Thanking you,	enference, Ils / receipts along-with Atter rending the aforesaid Confer the benefit of the faculty me attending the aforesaid Confer to the University in excess and conditions Con Name	ndance / Participation Cerence, embers of the Department erence. of the eligibility Date: nments	Dr. Veerappa	thin fifteen days to the on to share the knowledge 2022 Comment Approved. The a incentives will be released after the submission of original bills.

/elcome finance

- Application
- Final Approved List
- **Waster** Master
- Bank Details
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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4851.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	<u>View</u>
3	Accommodation charges	25000	5000.00	<u>View</u>
4	Other charges finance	25000	4000.00	<u>View</u>
	Total	100000	15851	
			Deny	Арриоке

			nk Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara bank	ADITYA R ACHARYA	5382210012801	CNRB0010556

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES

♠ Application (https://flixirsolutions.com/fin_assist/ii	ndex.php/Core/ass_list)	LIST	(HTTPS://FLIXIRSOL	UTIONS.COM/FIN_ASS	SIST/INDEX.	PHP/CORE/ASS_LIST)
♣ Final Approved List (https://flixirsolutions.com/fin_assist/i	A. To be filled by the faculty	y member: 2. Name		3. Qualification	,	4 Design of
A Hoor Moster			l Bhujabali Shanka	Lecturer		4. Designation Teaching Staff
(https://flixirsolutions.com/fin_assist/i				Lecturer		reaching Stair
Bank Details	5. Department	6. Institu		7. Email ID		8. Date of joining the Institution
(https://flixirsolutions.com/fin_assist/i	ndex-postrodfortoscond-chows)	KLE VK	Institute Of Denta	drswapnilshankarg	ouda@	08-09-2014
Change Password (https://flixirsolutions.com/fin_assist/i	ndex.php/Core/changepass) B. Particulars and assignm	ent in the	conference:			
<u> Logout</u> (https://flixirsolutions.com/fin_assis⊍i						
(nups.//iixirsolutons.com/iiii _assisut	Conference / Seminar / Symposium			om participation in th minar / Symposium	ie	Please enclose a separate sheet. View File
	Evolution revolution innov					(https://flixirsolutions.com/f in_assist/uploads/16219d2 3917c5d_To-
						swapnil.docx)
	3. Assignment in the afores	said Confe	rence / Seminar / S	ymposium		
	a)		b)	_	c) Othe	are .
	Contribut		Deliverin	0	if any.	ars. 👸
	ing a		g a guest		specify	<i>i</i> .
	scientific		lecture			
	paper (poster or					
	oral)					
	4 Details of the financial or					
	4. Details of the financial suby the University to attend		-			
	NO	$\overline{\mathbf{v}}$				
	a) Title of the Conference / Seminar / Symposium		b) Date of condu-	ct	Zonal / N	
			d) Venue		(Select	cial support extended by
					the Unive	ersity
	f) Copy of the sanction lette	er to be			Amou	nt dd-mm-yyy;
	enclosed					Y
	View File					
	Note : The faculty member Conference in a calendar y	_	for financial suppo	rt to attend one State	/ Zonal an	d one National
	C. Particulars of the organi	zers of the	proposed Confere	nce / Seminar / Symp	osium:	
	a) Name of the Organizer		b) Title of the pro		c) Place	
	SDM dental college and hosp	ital	24th Indian Prosth	nodontic Society Na	dharwad	
	d) Duration		e) Date		f) Eligible	amount
	3 Day >	~	04-03-2	16000	16000	amount
						ymller 'emmylanesa, knormennesi' sast, 'yakkalakaiduspalakaidussälensäleistöleiteiteiteis kidestäleiseks-akkak
	D. Expenses involved towa			: :		
	a) Place	b) Mode journey				
	dharwad	(By Roa		$\overline{\qquad}$		
		Dy Roa				
	a) Favo		a) #s =			Man / Dall - C - T
	c) Fare		d) To and For ex	ip.		ation / Delegation Fee
	0.00		2000.00		4720.00	
	f) Accommodation charg	es	g) Other charges	5	Total Exp	enses
	7200.00		4000.00		17920.00	

E. Documents to be submitted:

a) Copy of the letter of invitation from the organizers.

View File

(https://flixirsolutions.com/fin_ass

ist/uploads/16219d2391862d_PCC 16 LETTER INVITE.jpg) b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.

View File

(https://flixirsolutions.com/fin_assist/uploads/16219d2 3918909 PCC 16 LETTER INVITE.jpg)

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Accept terms and te conditions :

Comments

		Comments
Name	SINo Comm	ent
1	Dr. Veerappa	Approved. The Financial Assistance will be release after the submission of Original Bills

To

The Registrar,

KAHER,

Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Yours faithfully,

Signature of the HoD Principal

Add Your Comment Here Comment	
	Send

Welcome finance

28 Application

Final Approved List

User Master

Bank Details

Change Password

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Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4720.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	<u>View</u>
3	Accommodation charges	25000	7200.00	<u>View</u>
4	Other charges finance	25000	4000.00	<u>View</u>
	Total	100000	17920	
			Dery	

		Bank Deta	ils	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
	RANI			
	CHENNAMMA	SWAPNIL		
1	MAHILA	BHUJABALI	3002300002818	IBKL0101BZR
	SAHAKARI	SHANKARGOUDA		
	BANK			

Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Final Approved List	A. To be filled by the faculty	member:		
tps://flixirsolutions.com/fin_assist/	/index.php/Core/claimed_report) 1. Employee ID	2. Name	3. Qualification	4. Designation
<u>User Master</u> tps://flixirsolutions.com/fin_assist/	101112136	Sayed Mohammed M Kil	MDS	Teaching Staff
Bank Details	5. Department	6. Institution	7. Email Id	8. Date of joining the
tps://flixirsolutions.com/fin_assist/	/index.php/Gora/Bank Postails)	KLE VK Institute Of Deni	dr.sayed.k@gmail.com	Institution
Change Password	P 1 10 110			02-06-2014
tps://flixirsolutions.com/lin_assist/	/index.php/Core/changepass) B. Particulars and assignme	ent in the conference:		
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ps.//mxt/oordio/10.com/m/_gcolor	Symposium	rence / Semmai /	<u>View File</u> (https://flixirsolutions.com/f	in_assist/uploads/16222e0e
	Evolution, Revolution, Innov	ration	7f3c9 3.6.1 1613988663	
	2 Ronofite to be derived f	rom portioination in the	Diagon analogo a consuct	- shoot
	2. Benefits to be derived f aforesaid Conference / Se	•	Please enclose a separat	
			Choose File No file chos	en
	3.Assignment in the afore / Symposium	said Conference / Seminar	 a) Delivering key-note address/orations/plena 	ary lectures
			b) Contributing the sci	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(onl	1 1
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit	d to discuss
			f) Others. if any. specif	y.
	C.Particulars of the conference being attended	(NO v)		*
	a) Title of the Conference / Seminar / Symposium	24th Indian Prosthodo	b) Date of conduct	04-03-2022
	c) Venue	SDM dental college D	d) Financial support extended by the University	Amount 05-03-2022
	e, Quantum of financial eligible	grant		nt-
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	V
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member i Conference in a calendar ye	s eligible for financial suppo ar.	rt to attend one State / Zona	l and one National
	D.Particulars of the organize	ers of the aforesaid Conferen	ice / Seminar / Symposium	
	a) Name of the Organizer	SDM dental college D	b) Title of the program	24th National Indian F

e) Date of conference

04-03-2022

f) Financial grant

4750

Welcome finance

- & Application
- D Final Approved List
- User Master
- Bank Details
- Change Password

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4720.00	<u>View</u>
2	To and Fro expenses	25000	2000.00	<u>View</u>
3	Accommodation charges	25000	1800.00	<u>View</u>
4	Other charges finance	25000	0.00	<u>View</u>
	Total	100000	8520	
			Deny	Approve.

		Bank	Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1		Sayed Mohammed Muzamil Killedar	5042600001931	CNRB0010504



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL S	SUPPORT TO ATTEND	STATE / NATIONAL	CONFERENCES
(To be submitted to the	University through the	concerned HoD & Prin	ncipal)

APPLICATION FOR FINANCIAL SUPPORT TO (To be submitted to the University thro	ATTEND STATE / NATIONAL CONFERENCES ough the concerned HoD & Principal)
A. To be filled by the faculty member:	
1. Name	DR ADITYA ACMARYA
2. Qualification	M·D·S·
3. Designation	LECTURER.
4. Department	PROSTHODONTICS
5. Email ID	adiachama 123 @ amail.
6. Institution	adiachaya123@gmail.com. KAHER KLE UKIDS, BELAGANI.
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	27/08/2014
8. Objectives of the Conference / Seminar / Symposium	RESERVATION - RECONSTRUCTION TRANSFORMATIO
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
rufie Frooter	b) Contributing a scientific paper ATTACHEC c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11. Particulars of the Conference being attended	5
a) Title of the Conference / Seminar / Symposium	81 NIPS, K'NATAKA STATE CONFERENCE.
b) Date of conduct	20th 21th MAY 2022.
c) Level of Conference	State / -National-
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	BAGAL KOTE, K'TAKA.
f) Copy of the sanction letter along-with Brochure to be enclosed	SUBMITED ON LINE.
Note: The faculty member is eligible for financial support to attend one Sta	ate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	
a) Name of the Organizer	INDIAN PROSTMODONILG SOCIETY.
b) Title of the program LE Academy of Higher E duc stion & Research, EC)L/Riace	24" NATIONAL PG CONVENTION,
FINANCE SECULION	17th 19th MARCH 2022.
A) Detacle Conference	17th 19th MARCH 2022.
f) Financial grant availed KLE Academy of Higher Ed	117AR Salays.
Research, BELACA O 4 JUN 2022 Inward No	Aspenson In
10 a-6 22	





KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

(10 be submitted to the University the	ATTEND STATE / NATIONAL CONFERENCES rough the concerned HoD & Principal)
A. To be filled by the faculty member:	
1. Name	Dr. Abhiji't patil.
2. Qualification	MDS (prosthodontics).
3. Designation	Lecturer.
4. Department	prosthodontics & crown & brid
5. Email ID	products & Orout) & Drie
6. Institution	dr. abhijit patil 85 @ gmail. co
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	2 june 2014.
8. Objectives of the Conference / Seminar / Symposium	No. 1. A. 1. A. 1. De tria principal annihi annihi anni manganina annihi
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
•	b) Contributing a scientific paper
	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
the country of the co	e) Others, if any, specify.
11. Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	8th IPS Karnatoka State con
b) Date of conduct	20-21 St may 2022
c) Level of Conference	State / National State
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	Bagalkote
f) Copy of the sanction letter along-with Brochure to be enclosed	Day at RBEC
Note: The faculty member is eligible for financial support to attend one Sta	ale / Zonal and one National Conference in a sales described
Particulars of the financial support <u>previously</u> extended by the University	and the Netholas Collegence in a calendar year
a) Name of the Organizer	SDM Dental Gilage, Dhom
b) Title of the program	24 thyps national Pa conve
c) Place	
d) Duration	Dharwad, Karnataka,
e) Date of Conference	3. 2045.
carf)h, Financial grant availed	4-6th march 2021
VLE SECTION MERADINATION	(8000).
JUN 2022 023 sign	ABUNO
(1)) Cian II I	

Ref. NO. 143.

9

From,

Dr Ramesh P Nayakar

Professor

Department of Prosthodontics

KAHER KLE VKIDS, Belagavi.

To.

The Registrar

KAHER, Belagavi

SUB:1. Regarding sanctioning the remuneration amount for attending 24th IPS National PG Convention at Dharwad, Karnataka from 4th-6th March 2022.

2. Online uploading errors after uploading the receipts for the same through online portal.

Respected Sir,

With reference to the above mentioned subject, I, Dr Ramesh P Nayakar, Professor, Department of Prosthodontics, KLEVKIDS had attended the above mentioned conference as resource person and had applied for the remuneration through online portal on 23/02/2022. The online application was approved by the university and I was asked to upload the receipts for the same. After uploading receipts, the data was not saved and there was error which showing my accepted application again as new application. I am here by enclosing the accepted details of my remuneration and receipts for your kind information. Kindly consider my application and sanction the remuneration amount.

Thanking you

Date: 17/5/2022

Not Pold

Your's Sincearly

Dr Ramesh P Nayakar

Enclosures:

forwarded in

- 1. Screen shot of Online application approved details
- 2. Resource person certificates
- 3. Registration, Accommodation and travels receipts
- 4. Account Details

KLE Academy of Higher Education & Research, BELAGAVI FINANCE SECTION

1 9 MAY 2022

Inward No. 05 Sign

PRINCIPAL

KE V.K. Institute of Dental Sciences Hehru Nagar, BELAGAVI-590010



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH
(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD) & Principal)

	be filled by the faculty member:	
1. Nar	ne	Do Sagar Balma
2. Qua	lification	M-D-S
3. Des	ignation	Lecturity
4. Dep	partment	Public near Dentitor
5. Ema	ail ID	desagasialinde queil.
6. Inst	itution	ICLE, YEIDS BELGON
	e of joining the Institution (the faculty should ete minimum one year of service to avail this facility)	19/10/2012
8. Obje	ectives of the Conference / Seminar / Symposium	
	efits to be derived from participation in the aforesaid iference / Seminar / Symposium	Please enclose a separate sheet.
	signment in the aforesaid Conference / Seminar /	a) Delivering Key-note address / orations / plenary lectures
	*	b) Contributing a scientific paper
		(only on invitation)
		d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
		e) Others, if any, specify. Charling
11. Pa	rticulars of the Conference <u>being attended</u>	
a)	Title of the Conference / Seminar / Symposium	201 IACHO NOTIONA
b)	Date of conduct	D300 -
.c)	Level of Conference	State / National
d)	Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/-
	The second secon	National Level: Rs.16,000/-
e)	Venue	Meguines, Pailare Panasil
. f)	Copy of the sanction letter along-with Brochure to be enclosed	
Vote:	The faculty member is eligible for financial support to attend one St	ate / Zona and one National Conference in a calendar year
	articulars of the financial support <u>previously</u> ended by the University	1 8000 pt
a)	Name of the Organizer	
b)	Title of the program	
c)	Place	- V
= =	Duration	
e)	Date of Conference	(a) (a) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
f)	Financial grant availed	and the contract of the contra





KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University three	ough the concerned HoD & Principal)
A. To be filled by the faculty member:	
1. Name	Dr. Roopali. Sankeshwai
2. Qualification	MDS Ph.D.
3. Designation	Ready.
4. Department	Public Health Dertisty
5. Email ID	docrups @gmail.com
5. Institution	KLEVK IDS, Bolagan
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	24/6/2010.
B. Objectives of the Conference / Seminar / Symposium	
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
O. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
instead 12 90.	b) Contributing a scientific paper
Arspin street whenis paid	 c) International collaboration exchange program (only on invitation)
10. Assignment in the aforesaid Conference / Seminar / Symposium Page 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
inf by fouja.	e) Others, if any, specify.
1. Particulars of the Conference being attended	i .
a) Title of the Conference / Seminar / Symposium	26 ZAPHD- National Conferen
b) Date of conduct	2371-25th supt 2022
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/-
e) Venue	No. 14 a. S. Control Address of the Control of the
f) Copy of the sanction letter along-with Brochure to be enclosed	Maquinez Palace Panaji Groce
ote: The faculty member is eligible for financial support to attend one Sta	ate / Zonal and one National Conference in a calendar year
Particulars of the financial support <u>previously</u> extended by the University	
a) Name of the Organizer	ITS-Dental Glige - Madin
b) Title of the program	23rd IAPAD National Confere
c) Place	Modinager.
d) Duration with	3 days
*e) Date of Conference	30 Nov. 2018 - 3 Dec 2018.
f) Financial grant availed Deprey to be University	B 8000/-
	- According to the second seco



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NÁTIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:		
1. Name	DR. VAISHALI K. KELUSKA	
2. Qualification	MDS	
3. Designation	PROFESSOR & HEAD	
4. Department	DRAL MEDICINE & RADIOLO	
5. Email ID	drshalukids @redifmail com	
6. Institution	KLE V.K. IDS	
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	15 SEPT 1997	
8. Objectives of the Conference / Seminar / Symposium	UPDATE KNOWLEDGE ABOUT R	
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.	
10. Assignment in the aforesaid Conference / Seminar /	a) Delivering Key-note address / orations plenary lectures	
CE SECTION .	b) Contributing a scientific paper	
.5	c) International collaboration exchange program (only on invitation)	
SEP 2022	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only or invitation)	
055sign	e) Others, if any, specify CONDUSTING	
11. Particulars of the Conference being attended	FACULTY DEVELOPHENT WORKSH	
a) Title of the Conference / Seminar / Symposium	TACANA HATT ALL DO	
b) Date of conduct	26 to 28th AUG 2022	
c) Level of Conference	State / National	
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/-	
e) Venue	National Level . Rs.16,000/-	
f) Copy of the sanction letter along-with Brochure to be enclosed	JAIPUR GET ANDICOSED GET ANDICOSED	
Note: The faculty member is eligible for financial support to attend one Sta	Annual 19 Supplies of the Control of	
12. Particulars of the financial support <u>previously</u> extended by the University	- WIL -	
a) Name of the Organizer	Nie	
b) Title of the program	OFFICE OF THE REGISTRAR	
c) Place	KLE Acadamy of Higher Education	
d) Duration	& Research, BELAGAVI	
e) Date of Conference	0 6 AUG 2022	
Company of the Compan	700 2022	
f) Financial grant availed	laward nosign	
PO.8.		



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

	-2.			
13. Trave	elling (by shortest route) and other expenses involved	304.2 (1) 0.000 (and the second s	
	×	Particulars		
a)	Place	BECGAUM	JAIPUR	
b)	Mode of journey	FLIGHT	bedramed a security for torrown	
c)	Fare	15,000		
d)	To and Fro			
e) .	Accommodation charges	5000		
f)	Registration / Delegation Fee	5000	<u>.</u>	
g) ,	Air-port Tax		L. C.	
14. Docu	uments to be submitted:		1	
(a) (Copy of the letter of invitation from the organizers.	TARREST AND ADMINISTRATION OF THE PARTY OF T	Makeming years between the particular and the second	
b) (Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.			
	The country of the co	Mary		

DECLARATION

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

moviedge and expendice gained from	attending the aforesaid Conference.
Date : 4 - 8 - 2022	Signature of the faculty member
Ref. No	Date: 4-8-2022
The Registrar, KAHER, Belagavi.	
Dear Sir,	
inancial support to attend the International Co	ation of the above Teacher in the prescribed format for grant of conference outside India for kind consideration.
Thanking you,	
	Yours faithfully,

Signature of the HoD

Principal PRINCIPAL

LE V.K. Institute of Dental Sciences Wehru Nagar, BELAGAVI-580010.





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University thro	ough the concerned HoD & Principal)
A. To be filled by the faculty member:	
1. Name	Anjana Bagewadi
2. Qualification	MDS
3. Designation	Profe vice-Principa
4. Department	Osal Medicine & Radiologi
5. Email ID	ujavabagenadi 455 @goai I con
6. Institution	Je. IE MCID'S Blelagan
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	1/6/96
8. Objectives of the Conference / Seminar / Symposium	To updating / Joshare without
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment Symposium A Research, BELAGAVI FINANCE SECTION 0 5 SEP 2022 Inward No. OSS Sign.	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify
11 Particulars of the Conference being attended	freezer generally
a) Title of the Conference / Seminar / Symposium	IAOMR Nortional PG. Convent
b) Date of conduct	26 tr 28 August-2022 d
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	Jaipur all :(es)
f) Copy of the sanction letter along-with Brochure to be enclosed	Jaipur get (es)
Note: The faculty member is eligible for financial support to attend one Sta	ate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support previously extended by the University	- av.1-
a) Name of the Organizer	OFFICE OF THE
b) Title of the program	OFFICE OF THE REGISTRAR KLE Academy of Higher Education
c) Place	& Research, BELAGAVI
d) Duration	0 6 AUG 2022
Page of Conference	A MOU ZUZZ
f) Financial grant availed	Inward NoSignSign
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(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

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13. Tra	veiling (by shortest route) and other expenses involved		
enterprise angular		Part	iculars
a)	Place	Belgaum	Jaipur
b)	Mode of journey	Flight	
c)	Fare	15,800	
d)	To and Fro		Maria Bara
e)	Accommodation charges	5000 R	and distributed on the second
f)	Registration / Delegation Fee	500° PS	
g)	Air-port Tax	Manufacture and the second sec	A STATE OF THE PARTY OF THE PAR
14. Do	cuments to be submitted:		MATE
a)	Copy of the letter of invitation from the organizers.		a commence (Co. Co. Co. Co. Co. Co. Co. Co. Co. Co.
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Later Control	

I hereby déclare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date: 4/8/22	Signature of the faculty member
Ref. No.	Date: 4/8 202
То	'
The Registrar, KAHER, Belagavi.	
Dear Sir,	
We are enclosing herewith the a financial support to attend the Internation	pplication of the above Teacher in the prescribed format for grant of nal Conference outside India for kind consideration.
Thanking you,	
	Yours faithfully,

Signature of the HoD

Nemula de la companya de la companya

Principal PRINCIPAL

KLE V.K. Institute of Dental Sciences
Rehru Nagar, BELAGANAGER

6

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	Dr. Chetan. Belaldaras
2. Qualification	MDS
3. Designation	Lectuses
4. Department	Oxal Pathology
5. Institution	KLE VK IDS
3. Email ID	chetanbelaldavasa gmail.com
7. Date of joining the Institution	15 05 2013
3. Objectives of the Conference / Seminar / Symposium	An assortment of Scientific extravaganza
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	b) Delivering a guest lecture c) Others, if any, specify.
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	
a) Title of the Conference / Seminar / Symposium	10/
b) Date of conduct	1600/14/
c) Level of Conference (State / Zonal / National)	
d) Venue	/ /
e) Financial support extended by the University	
f) Copy of the sanction letter to be enclosed	
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference in a calendar year.</u>	
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	29th I AOMP National Confesence. Subhasti Dental College & Himachal
a) Name of the Organizer	Institute of Vental Sciences.
b) Title of the program	Maxillofacial Infections! Evolving Passadigm
c) Place OF THE REGISTRAR KLE Academy of Higher Education	Dehradhun
d) Duration & Research, BELAGAVI	03 days
e) Date 2 404 2022	11,12 &13 November 2022
f) Amount claimed 2 2 NOV 2022	
ineward NoSign	Aspenson
10	15 1 1122

Ref 210 ?69





KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

(To be submitted	to the University throu	du rue coucerne	u nob a Filicipal)
A. To be filled by the faculty membe	r:		
1. Name		Dr. SID	RAMESH MUTTAGI
2. Qualification			HNO, PKD
3. Designation	gare of a contacting of the co		(omts)
4. Department		Oral a-M	axillofac. Surgery
5. Email ID	Control of the Contro	siddu?	376@gmail.com
6. Institution	(Any year against the season of the season o	KLE VI	< Inst Dental Sci.
7. Date of joining the Institution (the facomplete minimum one year of service	culty should e to avail this facility)	26 July	
8. Objectives of the Conference / Sem	inar / Symposium	Maxillofa	c. Surgery: Expanding
Benefits to be derived from participal Conference / Seminar / Symposium			e a separate sheet. Enclosed)
10. Assignment in the aforesaid Confe Symposium	erence / Seminar /	a) Delivering plenary lector	Key-note address / orations / ures
Palla III . N.	ob la va	1	a scientific paper
Participation in Da		c) Internationa (only on invi	I collaboration exchange program itation)
Oncology (Topic: NA		d) Panel discu	ssion or to deliver talks / lectures
oral concer) as an i	invited	or invited invitation)	to discuss arts / skills (only on
Faculty	·	e) Others, if ar	ny, specify.
11. Particulars of the Conference b	eing attended		Appropriate and the state of th
a) Title of the Conference / Sem		Maxillofac S	urgen; Expanding the Envelop
b) Date of conduct			9th November 2022
c) Level of Conference	uni mater (quantità i Milatoni aleste ferre all 1 300	State / Nation	
d) Quantum of financial grant el	igible (or actuals	State Level	: Rs. 8,000/-
expenses, whichever is less)			: Rs.16,000/- 🗸
e) Venue	g (<u>Sangha</u> Biyen - 1779 ng marandaligh findar ar dawnyadal ah findal lawu (1932 ngu 1931 1941) sa bulann	Brilliant C	omention Center, Indove
f) Copy of the sanction letter ale	ong-with Brochure to	Dittibute	STATE OF THE PARTY
be enclosed			
Note: The faculty member is eligible for fina	ncial support to attend one S	State / Zonal and one	National Conference in a calendar year
12. Particulars of the financial extended by the University	support previously	MONE	4.
a) Name of the Organizer	dan i nas 💉 i set i i i jaga yangga mangkapanahaya yant ayan makala ayan ka	es la tre que amon toda una la sur	16000
b) Title of the program			100/10/
c) Place	=-		///
d) Duration		N. W. State Control of the Control o	A Control of the Cont
e) Date of Conference	OFFICE OF THE	All conservations are a second	one construction substitution of the construction of the construct
f) Financial grant availed	KLE Academy of His	ther Education	L. bernon?
	& Research, 9	PLANTE I	- the same of the f

Inward No.....Sign.....





KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTI

	through the concerned HoD & Principal)
A. To be filled by the faculty member:	The contented Hob & Principal)
1. Name	
2. Qualification	Dr. Vidyavalli H. Patil
3. Designation	MDS()
4. Department	Serios lectures
5. Email ID	Pediatric and Preventive Dentity
6. Institution	nisanga-vhp@ yohno, com
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility	revelos.
8. Objectives of the Conference / Seminar / Symposium	
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Trans le mula de syleet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
	b) Contributing a scientific paper
· ·	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks 11-1
	or invited to discuss arts / skills (only on invitation)
Address and the state of the st	e) Others, if any, specify.
Particulars of the Conference being attended	The second substitute of the second s
a) Title of the Conference / Seminar / Symposium	43rd National TSPD C
b) Date of conduct	91th oth
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals	The same of the sa
- The states, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	People's Destal College - Bloom 1
Copy of the sanction letter along-with Brochure to be enclosed	England.
te: The faculty member is eligible for financial support to attend one Sta	ate / Zonal and one Noticent Co.
extended by the University	No one reducinal conference in a calendar year
a) Name of the Organizer	The same of the sa
b) Title of the program	1,410//
c) Place	6
d) Duration	
e) Date of Conference	KLE Academy of Higher Education
f) Financial grant availed	FINANCE SECTION
	The state of the s





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
THE PARTY OF THE P	DR. NIRAJ GOKHALG
. Name	MDS
2. Qualification	READER
3. Designation	PEDIATRIC & PREVENTIVE DENTISTRY
4. Department	necraj pedo Q Klederbal-byn. edu.in
5. Email ID	KLE VILIBS
6. Institution	The state of the s
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	11.11.2014
8. Objectives of the Conference / Seminar / Symposium	KNOWLEDGE UPPATE
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet. KNOWLEDGE UTPATE
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program
w	(only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11. Particulars of the Conference being attended	
11. Laurichiais of the Comercine pound accounted	Programme and the state of the
a) Title of the Conference / Seminar / Symposium	PEDOTAAL
The second secon	PEDOTAAL 24-26 MOU 2022 97
a) Title of the Conference / Seminar / Symposium	24-26 MOU 2022 97
a) Title of the Conference / Seminar / Symposium b) Date of conduct	24-26 Nov 2022 State / National State Level : Rs. 8,000/- National Level : Rs.16,000/-
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	24-26 Nov 2022 State / National State Level : Rs. 8,000/- National Level : Rs.16,000/-
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals	24-26 Nov 2022 State / National State Level : Rs. 8,000/- National Level : Rs.16,000/-
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- PEOPLE'S DENTAL COLETE, BHOLAS SNCLOSED
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- PEOPLE'S PENTAL COLERS, BHOLAS State / Zonal and one National Conference in a calendar year
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one 12. Particulars of the financial support previously extended by the University	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- // COLE'S DENTAL COLETE, BHOLAS State / Zonal and one National Conference in a calendar year (APD
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one 12. Particulars of the financial support previously extended by the University a) Name of the Organizer	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- PEOPLE'S PENTAL COLERS, BHORS ENCLOSED State / Zonal and one National Conference in a calendar year
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- // COLE'S PENTAL COLETA, BHO/AF SMCLOSED State / Zonal and one National Conference in a calendar year
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program c) Place	State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- // Reofle's Pental college, Bholas Suclosed State / Zonal and one National Conference in a calendar year I APD I APD CONFERENCE
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program	State / National State Level: Rs. 8,000/- National Level: Rs.16,000/- // PEOPLE'S DENTAL COLETE, BHOM State / Zonal and one National Conference in a calendar year I APD IAPD CANFELENCE ONLINE





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	DR. SHIVAYOGI M. HUGAR
2. Qualification	MDS
3. Designation	PROF & HEAD
4. Department	PEDIATRIC & PREVENTIVE PENTISTRY
5. Email ID	dihugason @ Kledental-bym edy. in
6. Institution	KLE VKIDS
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	08-06 2006
8. Objectives of the Conference / Seminar / Symposium	KNOWLEDGE ULDATE
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet. KNOWLEDGE UPDATE
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
-dr	b) Contributing a scientific paper
•	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
11. Particulars of the Conference being attended	and the second s
a) Title of the Conference / Seminar / Symposium	PEDOTAAL
b) Date of conduct	74-26"NOU 2022
c) Level of Conference	State / National
Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	PEOPLE'S PENTAL COLLEGE, BHOPAL
f) Copy of the sanction letter along-with Brochure to be enclosed	ENCLOSED
Note: The faculty member is eligible for financial support to attend one St	ate / Zonal and one National Conference in a calendar year
Particulars of the financial support <u>previously</u> extended by the University	Kul / 1
a) Name of the Organizer	
b) Title of the program	11/4/01/7
c) Place	1600
d) Duration	
e) Date of Conference	
f) Financial grant availed	region (No.) householdstein Advantagement (No. 1991) - 1991

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (Gol)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 28112218

22nd November, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE VK Institute of Dental Sciences, Belagavi.

With reference to the above, the request of **Dr.Deepa R Mane** Professor, Department of Oral Pathology, KLE VK Institute of Dental Sciences, Belagavi. For attending 29th National Conference of **IAOMP** to be held **Dehradum**, Uttarakhand from 11th to 13th November, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.



Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The PA to Hon. Chancellor, KAHER, Belagavi.
- 2. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 3. The Principal, KLE VK Institute of Dental Science, Belagavi.
- 4. The Finance Officer, KAHER, Belagavi.

Ref. 160.326

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty n	nember:	2120 2 2005
I. Name	4	DY. DEEPA. R. MANE
Qualification		M.D.S, PhD
3. Designation		PROFESSOR
1. Department		ORAL PATHOLOGY
5. Institution		KLE VK IDS
3. Email ID		deeparajeshmane@gmail.com
7. Date of joining the Institution		28d TAN 2007
8. Objectives of the Conference	e / Seminar / Symposium	Maxillo Jacial Injulions - Evolving Pagas
9. Benefits to be derived from p Conference / Seminar / Sym	participation in the aforesaid	Please enclose a separate sheet. BEST ARTICLE AWARD
10. Assignment in the aforesaid Symposium		a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify. Chairpus or los Scientific Sexion
Conference (s) during th	inancial support already ersity to attend the similal se current calendar year 1 ^s 31 st December)	
a) Title of the Conference	e / Seminar / Symposium	
b) Date of conduct		
b) Date of conduct c) Level of Conference (State / Zonal / National)	
c) Level of Conference (State / Zonal / National)	
c) Level of Conference (S	0	
c) Level of Conference (State	ended by the University	
c) Level of Conference (State of Conference (State of Conference (State of Conference	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear.	
c) Level of Conference (Solution of Conference (Solution of Conference (Solution of Conference (Solution of Conference of Confer	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. hizers of the aforesaid	
c) Level of Conference (Solution of Conference (Solution of Conference (Solution of Conference in a calendar years of the organism of the orga	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. dizers of the aforesaid Symposium	NATIONAL TAOMP
c) Level of Conference (S) d) Venue e) Financial support exter f) Copy of the sanction I Note: The faculty memb support to attend one State Conference in a calendar year Conference / Seminar / S a) Name of the Organization of	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. eizers of the aforesaid Symposium er	NATIONAL IAOMP 29th National Conjunct of IAOMP
c) Level of Conference (S) d) Venue e) Financial support exter f) Copy of the sanction I Note: The faculty memb support to attend one State Conference in a calendar year Conference / Seminar / S a) Name of the Organization of	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. eizers of the aforesaid Symposium er	NATIONAL ILAOMP 29th National Confuence of IAOMP Dehradun
c) Level of Conference (S) d) Venue e) Financial support exter f) Copy of the sanction I Note: The faculty memb support to attend one State Conference in a calendar year Conference / Seminar / S a) Name of the Organization of	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. hizers of the aforesaid Symposium	NATIONAL ILAOMP 29th National Conjunct of IAOMP Dehradun 11th, 12th & 13th NOV 2023
c) Level of Conference (S) d) Venue e) Financial support externormal support externormal support externormal support to attend one State Conference in a calendar year. 12. Particulars of the organic Conference / Seminar / S a) Name of the Organization of the Organization of the Organization of the Place	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. dizers of the aforesaid Symposium er DEFICE OF THE REGISTRA LE Academy of Higher Education & Research, BELAGAVI	NATIONAL ILAOMP 29th National Conjunct of IAOMP Dehradun 11th, 12th & 13th NOV 2023 3 DAYS
c) Level of Conference (3) d) Venue e) Financial support exter f) Copy of the sanction I Note: The faculty memb support to attend one State Conference in a calendar year. 12. Particulars of the organization of the Organization in the Organization of Place d) Duration	ended by the University etter to be enclosed er is eligible for financia e / Zonal and one Nationa ear. eizers of the aforesaid Symposium er	NATIONAL ILAOMP 29th National Conjunct of IAOMP Dehradun 11th, 12th & 13th NOV 2023



(Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

13. Expenses involved towards attending the Conference:	
a) Place	D ====
b) Mode of journey	Denradun
c) Fare	Flight - Economy class
To and Fro expenses	Flight - & conomy class To: 9,465 + FRO: 6,744
Registration / Delegation Fee	16,209/-
Accommodation charges	14,500/-
Total Expenses	
4. Documents to be submitted:	30,709/-
a) Copy of the letter of invitation from the organizers.b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Enclosed

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- » I shall reimburse the amount to the University in excess of the eligibility.

Date:	Signature of the faculty member
Ref. No. 32-6	of the faculty member
То	Date:
The Registrar,	

KAHER. Belgaum.

Dear Sir.

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Signature of the H&D Professor and Head

Department of Oral Pathology, KLE V. K. Institute of Dental Sciences, Bo gaw

ute of De Nehru Nac

Yours faithfully.

Principal PRINCIPAL

KLE V.K. Institute of Dental Sciences Nehru Nagar, BELAGAVI-590010.



(Deemed-to-be-University established u/s 3 of the UGC Act, 1956) Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

😭: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 05122215

03rd December, 2022

ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

Shri B.M Kankanwadi Ayurveda Mahavidyalaya, Belagayi.

With reference to the above, the request of Dr.Vishawanath S Wasedar, Reader, Department of Panchakarma, Shri B .M Kankanwadi Ayurveda Mahavidyalaya, Belagavi. For attending '9th World Ayurveda Congress and Arogya Expo International Conference and also Contributing Scientific Paper to be held at Gao (Panaji) from 8th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Deemed-to-be University

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The PA to Hon. Chancellor, KAHER, Belagavi.
- 2. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 3. The Principal, Shri B .M Kankanwadi Ayurveda Mahavidyalaya, Belagavi.
- 4. The Finance Officer, KAHER, Belagavi.



SHRI BM KANKANAWADI AYURVED MAHAVIDYALAYA

Post Graduate Studies & Reseach Centre

(Approved by National Commission for Indian System of Medicine, New Delhi & M/o AYUSH, Gol)

A Constituent Unit of

KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(DEEMED-TO-BE- UNIVERSITY)

(Re-Accredited 'A+' Grade by NAAC (3rd Cycle) || Placed under Category 'A' by MHRD GoI)





First AYUSH Institution having NAAC & NABH Accreditation



Ref. No: BMX 2022-23 1637

Date: 30.11.2022

To,

The Registrar, KLE Academy of Higher Education & Research, Belgaum

Sub: "Grant of Financial support for attending Inter National Conference reg...

Sir,

With reference to the above subject, I am herewith forwarding the applications of following faculty member of our college in the prescribed format for grant of financial support to attend the Inter National Conference at Gao (Paniji) from 8th to 11th Dec 2022 as per below mentioned details.

Sl. No	Name of Teacher	Designation	Department	Conference details	Date of Confere nce
1	Dr. Vishwanath S Wasedar	Reader	Panchakarama	9 th World Ayurveda Congress & Arogya Expo	8 th – 11 th Dec 2022

This is for your information and do the needful.

Thanking you,

Yours truly,

PRINCIPAL

Shri B. M. Kankanwadi Ayurved Mahavidyalaya A Constituent Unit of KAHER Shahapur, BELAGAVI-03

OFFICE OF THE REGISTRAN REACEDORY OF HISPER ESTABLISH & RESSERT, ESLACATI

0 1 DEC 2022

Lymnoorl

Shahapur, Belagavi – 590 003, Karnataka, India Phone: +91 831 2486286; 7204969289 Fax: +91 831 2424157

Website: www. kleayurworld.edu.in, Email: bmkprincipal.kaher@kleayurworld.edu.in



KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	Dr. VISHWANATH. S. WASEDAN
2. Qualification	MD [Panchakarma]
3. Designation	Reader.
4. Department	Panchaka ma.
5. Institution	Stras. B. W. K. Ayurveda Mahavidy
6. Date of joining the Institution	28-01-2014
7. Objectives of the Conference / Seminar / Symposium	Confirence.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	(8000H
a) Title of the Conference / Seminar / Symposium	WAC 2022.
b) Date of conduct	8-12-2022 to 11-12-2022
c) Venue	Panjim GOA
d) Financial support extended by the University	3
e) Copy of the sanction letter to be enclosed	
f) Level of Conference State / Zonal / National	Internalismal.
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	MAC-2022 Aythodept Ayunuda Congress
b) Title of the program	Agunudo Congress
c) Place	GOA
d) Duration	4 days
e) Date	8-12-2022 to 11-12-2022
f) Amount claimed	21,900/



KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

12 Ev		-	
IZ. LA	penses involved towards attending the Conference:	d	*
a)	Place	GOA -	
b)	Mode of journey	CAR.	
c)	Fare		
	To and Fro expenses	250 X 14 =	3500
	Registration / Delegation Fee		2400
	Accommodation charges	4 dy ×4000-	16,000
	Total Expenses		21,900/
13. Do	cuments to be submitted:		
a) b)	Copy of the letter of invitation from the organizers. Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	=	
1	DECLARAT	ION	
Į.	hereby declare that :		
	• I shall produce necessary bills / receipts along-with Atten	dense / Dediction Cortific	The second secon
	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aforesaid to the University in excess of	rence, members of the Departmoresaid Conference.	
Date :	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aforest the shall reimburse the amount to the University in excess of	rence, members of the Departmoresaid Conference.	ent / Institution to share th
Ref. No To The Re KLE Ui	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aform attending the aform I shall reimburse the amount to the University in excess of the fact to the University in excess of the fact to the University in excess of the fact that the f	rence, members of the Departmeresaid Conference. of the eligibility.	ent / Institution to share th
Ref. No To The Re KLE Ui Belgau	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the afo I shall reimburse the amount to the University in excess of the fact type of type of the fact type of the	rence, members of the Departmeresaid Conference. of the eligibility.	ent / Institution to share the
Ref. No To The Re KLE Ui	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aforest the shall reimburse the amount to the University in excess to Signorn and Signorn attended to the University in excess to Signorn attended to the University in excess the same statement of the fact the fact that the same attended to the fact the fact that the same attended to the fact that the fact tha	rence, members of the Departments of the Departments of the Departments of the eligibility. Inature of the faculty ments of the facult	ent / Institution to share the
Ref. No To The Re KLE Ui Belgau Dear S	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aformation of the amount to the University in excess of the fact to the fact the f	rence, members of the Department of the eligibility. nature of the faculty mentors ove Teacher in the presence.	ent / Institution to share the
Ref. No To The Re KLE Ui Belgau Dear S	University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the fact ty knowledge and experience gained from attending the aforest the shall reimburse the amount to the University in excess to Signorn and Signorn attended to the University in excess to Signorn attended to the University in excess the same statement of the fact the fact that the same attended to the fact the fact that the same attended to the fact that the fact tha	rence, members of the Department of the eligibility. nature of the faculty mentors ove Teacher in the presence.	ent / Institution to share the





(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle) Pla

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 3/122205

26th December, 2022

ORDER

Sub :

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

Shri B .M Kankanwadi Ayurveda Mahavidyalaya, Belagavi.

With reference to the above, the request of Dr.P.G.Jadar, Dean and Vice-Principal, Department of Rasashastra And Bhaishajya Kalpana, Shri B .M Kankanwadi Ayurveda Mahavidyalaya, Belagavi. For attending '9th World Ayurveda Congress and Arogya Expo International Conference and also Contributing Scientific Paper and Chairing a Scientific session to be held at Gao (Panaji) from 8th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University & BELAGRY *

of. Dr. V.A. Kothiwale Registrar

To.

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, Shri B.M. Kankanwadi Ayurveda Mahavidyalaya, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.

SHRI BM KANKANAWADI AYURVED MAHAVIDYALAYA

Post Graduate Studies & Reseach Centre

(Approved by NCISM, New Delhi & M/o AYUSH, GoI)

A Constituent Unit of

KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(DEEMED-TO-BE- UNIVERSITY)

(Re-Accredited 'A+' Grade by NAAC (3rd Cycle) || Placed under Category 'A' by MHRD Gol)

First AYUSH Institution having NAAC & NABH Accreditation





Date: 22-12-2022



Brox 12022-23 / 1770 Ref No.

To.

The Registrar,

KAHER.

Nehru Nagar,

Belagavi.

Sub: Grant of Financial support for International Conference – reg.

Sir,

With reference to the above subject, we are herewith submitting the application of following faculty member of our college in the prescribed format for grant of financial support who have already attended the International conference i.e. World Ayurveda Congress-2022 (WAC-2022) at Goa which was held from 08-12-2022 to 11-12-2022. Due to severe health problem Dr. P.G. Jadar has submitted the application after attending the International conference. Hence, this is request you to consider the same.

S. No.	Name of the Faculty member	Assignment in the aforesaid conference
01	Dr. P.G. Jadar,	1) Contribution a Scientific Paper
	Professor & Dean	2) Chairing a Scientific session

This is for your information and do the needful.

Thanking you.

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI

2 4 DEC 2022

Inward No.

Shri B. D. Kankanawadi Ayurved Mahavidyalaya

Constituent Unit of KAHER Shahapur, BELAGAVI-06

26122

KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1 Name	Dr. PRASHANT. G. JADAD
2. Qualification	MD4phD
3. Designation	Dean & Vice- Principal
4. Department	Rasashastra & Bhaishajya kalpar
5. Institution	Shri BMK Ayurveda Mahavidyalay
6. Date of joining the Institution	20-09-2000
7. Objectives of the Conference / Seminar / Symposium	International Conference - Ayurva
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
 Assignment in the aforesaid Conference / Seminar / Symposium 	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
 Particulars of the financial support extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) 	
a) Title of the Conference / Seminar / Symposium	Horld Ayurveda Congreso-22
b) Date of conduct	08-12-2022 to 11-12-2022
c) Venue	Panjim-GOA
d) Financial support extended by the University	
e) Copy of the sanction letter to be enclosed	Yes
f) Level of Conference State / Zonal / National	International
Note : The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	, 1
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	World Agurreda Foundation
b) Title of the program	9th World Agurreda Congress 4 Exp
c) Place	Panim-GOA
d) Duration	04 days
e) Date	08-12-2022 to 11-12-2022



KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

a) 1	nses involved towards attending the Conference:	Papiim - Goa
<u> </u>	Place	Papiton - Goal
b) 1		100011113
	Mode of journey	Train
c) I	Fare Rideshano	Us 2.00h
-	To and Fro expenses	RAS 5 00-
	Registration / Delegation Fee	DI S 4. 700 -
	Accommodation charges	B: 1,500/-
	Total Expenses	4: 6,800 AONOX - W: 70
13. Doci	uments to be submitted:	3, 9,0,
b) (Copy of the letter of invitation from the organizers. Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Affachred
	DECLARA	TION
l h	ereby declare that :	
	I have furnished the information in this application which	is true to the best of my knowledge and belief
	 I am not getting any financial assistance / support from agency for attending the aforesaid Conference, 	
	I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe	
•	 I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aformation 	
	• I shall reimburse the amount to the University in excess	of the eligibility.
Date : _	22/2/29 Siç	gnature of the faculty member PGW
Ref. No.		Date:
То		
The Reg KLE Uni Belgaun	iversity,	
Dear Sir	,	
١	We are enclosing herewith the application of the al	pove Teacher in the prescribed format for grant
financial	I support to attend the Conference for kind considera	ation.
7	Thanking you,	Through the same of the same o
	7-	Yours faithfully,
	H.O.D.	(July
	ashastra & Bhaishajya Kalpana	
Rasa	re of the Hopurveda Mahavidyalaya	



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle) Placed in Category

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 16122-212

10th December, 2022

ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE College of Pharmacy, Belagavi.

With reference to the above, the request of Mr.Sanjay R Ugare, Assistant Professor, Department of Pharmacology, KLE College of Pharmacy, Belagavi. For attending '7th Annual International Conference on IRP' to be held College of Pharmacy, Panaji Goa, from 15th and 16th November, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be Chairces at & BELAGINIA **

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE College of Pharmacy, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 07-022304

18th January, 2023

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

Shri B M Kankanwadi Ayurveda Mahavidyalaya, Belagavi.

With reference to the above, the request of Dr.Deepti B Bagewadi, Associate Professor, Department of Panchakarma, Shri B .M Kankanwadi Ayurveda Mahavidyalaya, Belagavi. For attending 'Indian Academy of Fitness Training' to be held at Mangalore from 14th to 17th January, 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Higher Education Deemed-to-be University Registrar BELAGAN

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, Shri B.M. Kankanwadi Ayurveda Mahavidyalaya, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.

M KANKANAWADI AYURVED MAHAVIDYALAYA

Post Graduate Studies & Reseach Centre

A Constituent Unit of A Constituent Unit of

KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(DEEMED-TO-BE- UNIVERSITY)

(Re-Accredited 'A+' Grade by NAAC (3rd Cycle) || Placed under Category 'A' by MHRD GoI)



First AYUSH Institution having NAAC & NABH Accreditation



Ref. No: BMK 2022-23 1975

Date: 25.01.2023

To, The Registrar, KLE Academy of Higher Education & Research, Belgaum

> Sub: Release of Financial Grant for attended to National conference Ref No. Order KAHER.2022-23/D-23012316 Dt: 18.01.2023

Sir.

With reference to the above subject, we are herewith submitting the attendance Certificate, Photographs and Original bills/ Vouchers of the faculty members who have attended "Indian Academy of Fitness Training on Pilates held at Mangalore from 14th to 17th Jan 2023 as per your approval letter for release of Financial Grant. The details of the faculty are as follows.

Sl. No	Name of Teacher	Designation	Department
1	Dr. Deepty Bagewadi	Associate Professor	Panchakarma

This is for your information and release the same.

Thanking you,

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI JAN 2023

Encl: As above

RINCIPAL Shri B. M. Kankanwadi Ayurved Mahavidyalaya A Constituent Unit of KAHER Shahapur, BELAGAVI-03

Yours truly,

Shahapur, Belagavi – 590 003, Karnataka, India Phone: +91 831 2486286; 7204969289 Fax: +91 831 2424157 Website: www. kleayurworld.edu.in, Email: bmkprincipal.kaher@kleayurworld.edu.in

KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Research)

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	4.
1. Name	Dr. Deepti. Bagewadi Master of Physiotherapy. Associate Professor. Panchakarma.
2. Qualification	Master of physicitherapy.
3. Designation	Associate Professor.
1. Department	Panchakarma.
5. Institution	RAHER'S Shri BMK Ayurueda Mal 16th September 2009. Certification Course.
6. Date of joining the Institution	16th september 2009.
7. Objectives of the Conference / Seminar / Symposium	Certification Course.
3. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
9. Assignment in the aforesaid Conference / Seminar / Symposium	 a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) Chairing a scientific session d) International collaboration exchange program (only on invitation) e) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) f) Others, if any, specify. Training Program
	Ty Salete, it dily, speedly. The
10. Particulars of the financial support extended by the University to attend the International Conference(s) during the block period of three years (1 st January to 31 st December)	NIL.
University to attend the International Conference(s) during the block period of three years (1 st January	
University to attend the International Conference(s) during the block period of three years (1 st January to 31 st December)	
University to attend the International Conference(s) during the block period of three years (1 st January to 31 st December) a) Title of the Conference / Seminar / Symposium	
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct	
during the block period of three years (1 st January to 31 st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue	
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed	NIL.
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed 11. Particulars of the organizers of the aforesaid	NIL.
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed 11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	NIL.
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed 11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer	Indian Academy of fitners Train Pilates Instructor Training
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed 11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program	Indian Academy of fitness Train Pilates Instructor Training
University to attend the International Conference(s) during the block period of three years (1st January to 31st December) a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Venue d) Financial support extended by the University e) Copy of the sanction letter to be enclosed 11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer b) Title of the program c) Place	



KLE UNIVERSITY

(Formerly known as KLE Academy of Higher Education & Resea [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/20

	e u	International	Domestic
a)	Place		Mangalore
b)	Mode of journey		Mangalore By road
c)	Fare		. 1160 + 850.
d)	To and Fro		1160 +850
e)	Accommodation charges		58241-
f)	Registration / Delegation Fee		5000/-
g)	Air-port Tax		
13. Do	cuments to be submitted:		
a)	Copy of the letter of invitation from the organizers.		
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.		
14.Sigr	nature of the faculty member		

DECLARATION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.

 I shall conduct a seminar for the believed knowledge and experience gained from 	refit of the faculty members of the Department / Institution to share the attending the aforesaid Conference.
Date :	Signature of the faculty member
Ref. No	Date: <u>23 1 23 </u>
То	
The Registrar, KLE University, Belagavi.	
Dear Sir,	
	cation of the above Teacher in the prescribed format for grant of onference outside India for kind consideration.
Thanking you,	
	Yours faithfully,

Signature of the HoD

Seal

Shri B. M. Kankanwadi

Ayurved Mahavidyalaya A Constituent Unit of KAHER Shahapur, BELAGAVI-03) Welcome finance

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application (https://flixirsolutions.com/fin_assist/index	c.php/Core/ass_list)	LIST (HTTPS://FLIXIRSOLU	UTIONS.COM/FIN_ASSIST/INDE	EX.PHP/CORE/ASS_LIST)	
Einal Approved List (https://flixirsolutions.com/fin_assist/index	a. To be filled by the faculty	member:			
(nttps://flixirsolutions.com/iiii assisvinde/	1. Employee ID	2. Name	3. Qualification	4. Designation	
User Master (https://flixirsolutions.com/fin assist/index	101113105 cphp/Core/User_page)	Sneha Basangouda Pati	M- Phamacy	Teaching Staff	
Bank Details	5. Department	6. Institution	7. Email Id	8. Date of joining the	
(https://flixirsolutions.com/fin_assist/index	x.php/Goro/BankyDetails)	KLEU College Of Pharm	snehabpatil11@gmail.co	Institution	
Change Password (https://flixirsolutions.com/fin_assist/index.	x.php/Core/changepass)			19-08-2019	
△ Logout	I. Particulars and assignme	ent in the conference:			
(https://flixirsolutions.com/fin_assist/inde:	x.pho/Sparaledshor legoch)nfe Symposium	erence / Seminar /		n_assist/uploads/1625eaa52	
	The conference will be highl	lighting on several crucial and	6ab89 Poster acceptance,	<u>odf)</u>	
	2. Benefits to be derived f	*	Please enclose a separate sheet.		
	aroresara comercince / oc	minat 7 Cymposiam	Choose File No file chose	en ,	
	3.Assignment in the afore / Symposium	esaid Conference / Seminar	a) Delivering key-note address/orations/plena	ry lectures	
			b) Contributing the scie	entific paper	
			c) Chairing a scientific	session	
			d) International collabo exchange program(only		
			e) Panel discussion or talks/lectures or invited arts/skills(only on invited	l to discuss	
			f) Others. if any. specify	<i>i</i> .	
	C.Particulars of the conference being attended	(NO V)			
	a) Title of the Conference / Seminar / Symposium	Historical Mega Event	b) Date of conduct	22-04-2022	
	c) Venue	JSS Academy of High	d) Financial support extended by the University	Amount dd-mm-yyyy	
	e. Quantum of financia	l grant			
	eligible	· grain			
•	•			2	
	I) State :Rs 8,000/-		II) National :Rs 16,000/-		
	f) Copy of the sanction letter to be enclosed	View File			
	Note : The faculty member i Conference in a calendar ye	is eligible for financial suppo ear.	ort to attend one State / Zona	and one National	
	D.Particulars of the organiz	ers of the aforesaid Conferen	nce / Seminar / Symposium		
	a) Name of the	Prof. K. Mruthunjaya	b) Title of the	Historical Mega Event	
	Organizer		program	*	
	c) Place	Mysuru	d) Duration	Day	
	e) Date of conference	22-04-2022	f) Financial grant	8000	

Send For Approval

welcome finance

- Application
- Final Approved List
- User Master
- Bank Details
- Change Password
- Logout

AMOUNT CLAIM LIST

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	3000.00	<u>View</u>
2	To and Fro expenses	25000	1635.00	View
3	Accommodation charges	25000	4500.00	<u>View</u>
4	Other charges finance	25000	1894.00	<u>View</u>
	Total	100000	11029	
			Deny	Approve

		В	ank Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1		SNEHA B PATIL	5042610006338	CNRB0010504



APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

Application		LIST (HTTPS://	FLIXIRSOLUTIONS.COM/FIN_ASSIS	T/INDEX.PHP/CORE/ASS_LIST)
(https://flixirsolutions.com/fin_assist/i	index.php/Core/ass_list) A. To be filled by the faculty memi	ber:		
♠ Final Approved List (https://flixirsolutions.com/fin_assist/i	1 Employee ID	2. Name Sanjay Rayagouda Ugare	3. Qualification M-pharmacy	4. Designation Teaching Staff(Assistant Profes
<u>User Master</u> (https://flixirsolutions.com/fin_assist/i		6. Institution	*	
<u>⚠ Bank Details</u>	Pharmacology	KLEU College Of Pharmacy,Be	7. Email Id sanjayugare@gmail.com	8. Date of joining the Institution
(https://flixirsolutions.com/fin_assist/i				06/12/2015
♠ Change Password (https://flixirsolutions.com/fin_assist/i	B. Particulars and assignment in tindex.php/Core/changepass	the conference:		
Logout (https://flixirsolutions.com/fin_assist/i	1. Objectives of the Conference index php/Care/admin index.php/Care/admin index.php/Care/adming.et/inophiannacology for Regelling.et/inophiannacology for		View File (https://flixirsolutions.com/fin_assefit from conference.jpeg)	ist/uploads/1626a38581e497_Ben
	Benefits to be derived from p Conference / Seminar / Sympos	•	Please enclose a separate sheet.	
	, , , , , , , , , , , , , , , , , , ,		Choose File No file chosen	
	3.Assignment in the aforesaid (Symposium	Conference / Seminar /	a) Delivering key-note addres lectures	ss/orations/plenary
			b) Contributing the scientific	paper
			c) Chairing a scientific sessi	on
			d) International collaboration program(only on invitation)	exchange
			e) Panel discussion or to del or invited to discuss arts/ski invitation)	
			f) Others. if any. specify.	
	C.Particulars of the conference being attended	(NO •)		
	a) Title of the Conference / Seminar / Symposium	Redefining Ethnopharmacoli	b) Date of conduct	22/04/2022
	c) Venue	Mysore	d) Financial support extended by the University	8000 27/04/2022
	e. Quantum of financial grant	eligible		
	I) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty member is eligit	ble for financial support to attend	one State / Zonal and one Nationa	l Conference in a calendar year.
	D.Particulars of the organizers of	the aforesaid Conference / Semina	r / Symposium	
	a) Name of the Organizer	JSS College of Pharmacy,M	b) Title of the program	Redefining Ethnopharmacoli
	c) Place	Mysuru	d) Duration	(3 >) (Day >)
	e) Date of conference	22/04/2022	f) Financial grant sought	8000
	E. Expenses involved towards atte	ending the Conference:		
	a) Place	Myeuru		
	b) Mode of Journey	Mysuru (By Road •)	
	Amount in Rs c) Fare	937.00	d) To and For exp.	1874.00
	e) Registration / Delegation Fee	3000.00	f) Accommodation charges	1990.00
	g) Other charges	170.00	Total Expenses	7971.00
	F. Documents to be submitted:			
	a) Copy of the letter of invitation fro	om the organizers.	View File (https://flixirsolutions.com/fin_assi	st/uploads/1626a38581f580_Abst

b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.

View File

(https://flixirsolutions.com/fin_assist/uploads/1626a38581f6a5_SAN JAY POSTER PRESENTATION MYSORE 2022.pdf)

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief,
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference,
- I shall reimburse the amount to the University in excess of the eligibility

17

Accept terms and conditions

Date:

27/04/2022

Comments

	Name	ł .	Comment
1		 Dr.	Approved. The financial grants will be released
		Veerappa	a after uploading all originals bills

То

The Registrar,

KAHER,

Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Yours faithfully,

Signature of the HoD Principal

Add Your Comment Here Comment

Send For Approval

AMOUNT CLAIM LIST

Approved List

Change Password

User Mester

Bank Details

Logott

SnNo	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	3000.00	View
2	To and Fro expenses	25000	1874.00	<u>View</u>
3	Accommodation charges	25000	1990.00	<u>View</u>
4	Other charges finance	25000	170.00	<u>View</u>
1.74 7.01	Total	100000		
			Oury	Approvu

Bank Details				
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	CANARA BANK	SANJAY UGARE	504218001795	6 CNRB0010504





KLE COLLEGE OF PHARMACY, BELAGAVI



A Constituent Unit of

KLE Academy of Higher Education and Research

(Deemed-to-be University established u/s 3 of the UGC Act, 1956), Re-accredited A* Grade by NAAC (3rd Cycle) Placed in Category 'A' by MHRD (Gol) Recognized by PCI & AICTE; B. Pharm program has been accredited by NBA (4th Cycle) for a period of 6 years (up to June 2025)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka, India. Phone: +91 831-2471399; Web: www.klepharm.edu; E-mail: principal@klepharm.edu

Ref. No. KLE/COP/ 455 2022/23

Date: 1977122

FINANCE SECTIO

0 6 AUG 2022

To,

The Registrar, KLE Academy of Higher Education & Research, Belagavi.

Sub: Grant of Financial Support for National Conferences.

Sir,

With reference to the subject cited above, I am forwarding herewith request application of Dr. Pramod H. J, Professor, Department of Pharmacognosy KLE College of Pharmacy Belagavi for sanction of Financial Support for Attend the National Conference - "XIIth IASTAM ORATION AND AWARD FUNCTION " Assidemy of Higher, Educa & Research, BELAGANI

2022, New Delhi, India, during July 29-30th, 2022.

Yours faithfully,

permited of Autel

BELAGAV 590 010

Principal, KLE College of Pharmacy, Belagavi.

Encl: As above

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Rosearch, BELAGAVI 19 JUL 2022

For Registre

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	Dr. Pramod. J. Hurkadal
2. Qualification	M. Pharm, Ph.D., PDCR
3. Designation	Professor
4. Department	Pharmacognosy
5. Email ID	Dramod hurakadle ayahoo
3. Institution	KliE College of Pharmay, B
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	-NA - (OCT 2004)
3. Objectives of the Conference / Seminar / Symposium	International Conclave-203
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures / Specific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11 Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	JASTAM Conclave - 2002
b) Date of conduct	2973 th July 2022 State / National (International Con
c) Level of Conference	State / National (International Con
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	Jamia Hamdard, New 19
f) Copy of the sanction letter along-with Brochure to be enclosed	- Enclosed -
Note: The faculty member is eligible for financial support to attend one St	ate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	- Not Availed -
a) Name of the Organizer	
b) Title of the program	
c) Place	NA
d) Duration	
e) Date of Conference	
f) Financial grant availed	



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

	- 2 -	
13. Trav	velling (by shortest route) and other expenses involved	Belagari - Delli - Relagar
Agamentus service s'assesses albeite	*	O Particulars U
a)	Place	ven Delhi
b)	Mode of journey	ATA
c)	Fare	15,850 = 00
d)	To and Fro	16,850=00
e)	Accommodation charges	complimentary
f)	Registration / Delegation Fee	Complimentary
g)	Air-port Tax	2180=00
14. Do	cuments to be submitted:	
a)	Copy of the letter of invitation from the organizers.	-> Suclosed.
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	-> Snelosed -
arvalus	DECLARA	TION

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / stitution to share the knowledge and experience gained from attending the aforesaid Conference.

Ref. No.

To

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Yours faithfully,

5 Patil

Signature of the HoD

Principal

KLE College of Fharmacy BELAGAVI - 10.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

(To be submitted to the University thro	ough the concerned HoD & Principal)
A. To be filled by the faculty member:	
1. Name	NAMIT KUDATARKAR
2. Qualification	M Phasm
3. Designation	Assistant Projector
4. Department	Pharmacology
5. Email ID	namitkudatarkar 18@gmail.com
6. Institution	KLE COPS Belagari
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	0110812018
8. Objectives of the Conference / Seminar / Symposium	Understanding disease at cellules & molecu
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11 Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	Molecular and Cellular Insights afternam 02-03th September 2022
b) Date of conduct	02-03th September 2022
c) Level of Conference	State / National
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	University of Kashmir
f) Copy of the sanction letter along-with Brochure to be enclosed	
Note: The faculty member is eligible for financial support to attend one S	itate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	
a) Name of the Organizer	KLE University
b) Title of the program	AYUSH REMEDIES
c) Place	Gujarat
d) Duration	28-29th November 2021 28-29th November 2021
e) Date of Conference	28-29th November 2021
f) Financial grant availed	Yes, 160001-



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

13. Travelling (by shortest route) and other expenses involved		
	Р	articulars
a) Place	Belagari	Kashmid Stinagan
b) Mode of journey	Air	Air
c) Fare	*	-
d) To and Fro	7500	7500
e) Accommodation charges	*	4000
f) Registration / Delegation Fee		1000
g) Air-port Tax	-	to an a successful to the series and series are series and series are series and series and series and series are series and series and series and series are series and series are series and series and series are series and series are series and series and series are series are series and series are series and series are series are series and series are series are series and series are series
14. Documents to be submitted:		
 a) Copy of the letter of invitation from the organizers. b) Copy of the full text of documents / abstract / paper 		

DECLARATION

I hereby declare that

prepared by the applicant for presentation.

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date 30/07/2022

Signature of the faculty member

_ 9

20/07/2022

Ref. No.

To

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

Yours faithfully,

Principal PA

KLE College of Pharmacon BELAGAVI - 10.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal) A. To be filled by the faculty member: 1. Name 2. Qualification 3. Designation Pharma cur Pratties 4. Department aishaard shikemath & klepha 5. Email ID 6. Institution 7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility) 8. Objectives of the Conference / Seminar / Symposium 9. Benefits to be derived from participation in the aforesaid Please enclose a separate sheet. Conference / Seminar / Symposium 10. Assignment in the eforesaid Conference & Seminar /
Symposium LE Academy of Higher Academy of Highe a) Delivering Key-note address / orations / & Research, BELAGAVI plenary lectures FINANCE SECTION b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) 2 2 SEP 2022 d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) Inward No. 012 Sign. e) Others, if any, specify. 11 Particulars of the Conference being attended APTICON - 2022 a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference Quantum of financial grant eligible (or actuals State Level d) expenses, whichever is less) National Level . Rs.16,000/e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year 12. Particulars of the financial support previously extended by the University a) Name of the Organizer Title of the program b) c) Place d) Duration OFFICE OF THE REGISTRAR Date of Conference KLE Academy of Higher Education & Research, BELAGAM Financial grant availed

FOR

ATER

Aspendant 14/9



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

	- 2		
13. Tr	avelling (by shortest route) and other expenses involved		D'occupant
	*	Parti	culars
a)	Place	Musoke TSS	Polled.
b)	Mode of journey	Buls ,	lung
c)	Fare	860/	860/
d)	To and Fro	ansast-	560/-
e)	Accommodation charges	2856/-	
f)	Registration / Delegation Fee	35HO/-	
g)	Air-port Tax		CONTROL OF THE STATE OF THE STA
4. Do	ocuments to be submitted:		
a)	Copy of the letter of invitation from the organizers.	regionari ready aparty adverging de v ridge, viva	
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.		

DECLARATION

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date: 13/9/2022

Signature of the faculty member

Ref. No. KLE COP 659 2022 23

То

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

Yours faithfully,

Principal

PRINCIPAL
KLE College of Pharmacy
BELAGAVI - 590 010.





Incomed-to-he-University estat	as KLE University) blished u/s 3 of the UGC Act, 1956]
	D ATTEND STATE / NATIONAL CONFERENCES hrough the concerned HoD & Principal)
. To be filled by the faculty member:	
Name	PRAMOD J. HURKADALE
Qualification	M. Pharm. Ph.D
. Designation	Professos
. Department	Pharmacognosy
Square of a distance of the analysis of the square of the	pramodhuratadle @ yahro:com
. Email ID	KLE College of Pharmacy, Belagari
i. Institution 7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility	
3. Objectives of the Conference / Seminar / Symposium	
Benefits to be derived from participation in the aforesa	nid Diege enclose a separate street.
Conference / Semipar / Symposium 10. Assignment in the aforesaid Conference / Seminar / Symposium Symposium All Particulars of the Conference being attended	a) Delivering Key-note address / orations / plenary lectures
Symposium (Convention)	b) Contributing a scientific paper
Cubrul of Am	c) International collaboration exchange program
Re Je 180	(only on invitation) d) Panel discussion or to deliver talks / lectures
in the contraction of the	or invited to discuss arts / skills (only on
	invitation)
Lesor 1	e) Others, if any, specify. Speaker Resource
11 Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	Translational Research or Judian
THE THE RESIDENCE WITH THE COME SHARED IN SECURITY AND A RESIDENCE AS A SECURITY OF THE COMPANY	23-24 September 702
b) Date of conduct	State / National
c) Level of Conference	Do 9,000/.
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	National Level: Rs.16,000/-
expenses, which controlled	JADAVPUR UNIVERSITY, KOLKATA
e) Venue	
f) Copy of the sanction letter along-with Brochure be enclosed	
Note: The faculty member is eligible for financial support to attent	id one State / Zonal and one National Conference at a series
12. Particulars of the financial support <u>previ</u> extended by the University	ously Not Available
a) Name of the Organizer	Jan Name of State of
b) Title of the program	(Conserver).
c) Place OFFICE C	OF THE REGISTRAR
d) Duration KLE Acade	emy of Higher Education
e) Date of Conference & Res	search, BELAGAVI
and the same avoiled	search, BELAGAVI 7 SEP 2022
f) Financial grant availed	2 SEP 2022
	45
Inward No	Sign

Inward No.....Sign..

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(Formerly known as KLE University)

[Deemed-to-be-Universit, established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO AT (To be submitted to the University through	
A. To be filled by the faculty member:	
1. Name	ON MAHESHS JALLED
2. Qualification	Examples. M. Non 14.
3. Designation	professor.
4. Department	I harmaceureal chemistry.
5. Email ID	professor. Thermaceurical chemistry. Is passed of mail. com KIE college of Manay Be
6. Institution	KLE college of Mamay Be
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	1710(200)
8. Objectives of the Conference / Seminar / Symposium	- Endard -
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11 Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	ICVD-2022
b) Date of conduct	10th as 11th NOV-2022
c) Level of Conference	State / National
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	BITS PILANT GOA
 f) Copy of the sanction letter along-with Brochure to be enclosed 	
Note: The faculty member is eligible for financial support to attend one S	tate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>gre-hously</u> extended by the University	
a) Name of the Organizer	BITS PILANT

- b) Title of the program
- c) Place
- d) Duration
- Date of Conference
- Financial grant availed

I cod



E

(Formerly known as KLE University)
Deemed-to-be-University established u/s 3 of the UGC Act, 1956

ROFESSYONALS	Deemed-to-be-University estab	lished u/s 3 of the UGC Act, 1956]
APPL	ICATION FOR FINANCIAL SUPPORT TO	ATTEND STATE / NATIONAL CONFERENCES rough the concerned HoD & Principal)
A. To be filled	by the faculty member:	3 Third Tibb at Timepary
1. Name		Ms. Robini. S. Kavalapuce
2. Qualification		M. Pham
3. Designation		Assistant Professor
4. Department		pharmaceutical Chemistry
5. Email ID		rohini Kavalapuse @ Yahoo.com
6. Institution		KIE College of phonon
7. Date of joining complete minim	g the Institution (the faculty should um one year of service to avail this facility)	KLE College of Pharmacy-Belgaur
8. Objectives of	the Conference / Seminar / Symposium	Drug dis weis & Development (ICDD)
9. Benefits to be Conference /	derived from participation in the aforesaid Seminar / Symposium	Please enclose a separate sheet.
10. Assignment Symposium	in the aforesaid Conference / Seminar /	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures
		invitation)
11 Doutionland		e) Others, if any, specify.
	of the Conference being attended	•
	ne Conference / Seminar / Symposium	International configure on Drug discoury,
b) Date of c		
c) Level of	Conference	State / National

d) Quantum of financial grant eligible (or actuals expenses, whichever is less)

e) Venue

f) Copy of the sanction letter along-with Brochure to be enclosed

State Level : Rs. 8,000/

National Level: Rs.16,000/-

BIRS Pilani - Goa

Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year

12. Particulars of the financial support <u>previously</u> extended by the University

a) Name of the Organizer

b) Title of the program

c) Place

d) Duration

e) Date of Conference

f) Financial grant availed





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

1. Name		
2. Qualification	- establish annother the establish annother the	Dr. Preeti Salve
3. Designation		M. Pharm, PhD
4. Department		Asst-Professor
5. Email ID		Pharmaceutical Chemistry
6. Institution		preetisalve Okle pharmedy
The state of the s		KLECOP, Belagavi
Date of joining the Institution (the faculty she complete minimum one year of service to avai	ould	16/11/2017
3. Objectives of the Conference / Seminar / Sy	/mpesium	
Benefits to be derived from participation in the Conference / Seminar / Symposium	he aforesaid	International Conference on Drug Discour
Assignment in the aforesaid Conference / Symposium	Seminar /	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
. Particulars of the Conference being atten	nded	l any, specify.
a) Title of the Conference / Seminar / Sym	DOSIUM	lala va al Santa de
b) Date of conduct	1	International Conference on Drug Discous
c) Level of Conference	en the second of	10 x 11" Nov. 2022
Quantum of financial grant eligible (or ac expenses, whichever is less)	ctuals	State / National International State Level Rs. 8,000/-
e) Venue	- Manage	National Level: Rs.16,000/-
f) Copy of the sanction letter along-with Brobe enclosed	ochure to	BITS-Pilani, Goa Attached 8000
e: The faculty member is eligible for financial support	- I	muched 10
Particulars of the financial support gextended by the University	reviously	te / Zonal and one National Conference in a calendar year
Name of the Organizer		_
b) Title of the program	William to the second	
c) Place	TOPPICE -	FTHE REGISTRAR
d) Duration	- FLGG. 9;	The first of the second
e) Date of Conference .	& Ros	earch, BELAGAVI
/ uto or colligrance	1	
) Financial grant availed	2.0	ACT - 2000





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	1
1. Name	Mr Krown N. Grikuna
2. Qualification	M. Pharm
3. Designation	Assistant Profession
4. Department	Pharmecelical Chemistry
5. Email ID	kinggeikwad @ klephamiedy
6. Institution	KL6 college of Pharmacy, Bel
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	10/08/12016
8. Objectives of the Conference / Seminar / Symposium	Conference
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
•	b) Contributing a scientific paper
	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
11. Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	International conference on Doug &
b) Date of conduct	10th - 11th November 2022
c) Level of Conference	State / National International
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/-
	National Level: Rs.16,000/-
e) Venue	Commission of the commission o
e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed	To it is the control of the control
f) Copy of the sanction letter along-with Brochure to	BITS- Pilani Goa.
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University	BLTS- Plani Goa. Tate / Zonal and one National Conference in a calendar year
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University a) Name of the Organizer	81TS- Plani Goa. Tate / Zonal and one National Conference in a calendar year RTTC- Pilopi Goa Campus
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University a) Name of the Organizer KLE Academy of the Edit	81TS- Plani Goa. Tate / Zonal and one National Conference in a calendar year BITS- Pilani - Goa Campus
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University a) Name of the Organizer KLE Academy of the law of the previous of the law of the	BITS- Plani Goa. Tate / Zonal and one National Conference in a calendar year BITS- Pilani - Goa Campus TCDD.
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program	BITS- Plani Goa. Tate / Zonal and one National Conference in a calendar year BITS- Pilani - Goa Campus TCDD. K.K.Birala Campus, Goa.
f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one St. 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program c) Place	BITS- Plani Goa. Tate / Zonal and one National Conference in a calendar year BITS- Pilani - Goa Campus TCDD.



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 16122-212

10th December, 2022

ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE College of Pharmacy, Belagavi.

With reference to the above, the request of Mr.Sanjay R Ugare, Assistant Professor, Department of Pharmacology, KLE College of Pharmacy, Belagavi. For attending '7th Annual International Conference on IRP' to be held College of Pharmacy, Panaji Goa, from 15th and 16th November, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be Limiversity

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE College of Pharmacy, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University the	prough the concerned HoD & Principal)
A. To be filled by the faculty member:	- Indipary
1. Name	Sanjay R. Ugare.
2. Qualification	M- pharm.
3. Designation	Assistant profess & - I
4. Department	B = 21011 2 - 7
5. Email ID	Pharmacology designation
6. Institution	Janjayugare Ogmail com
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	KLE colleged pharmacy, Bym. 12-06-2015
8. Objectives of the Conference / Seminar / Symposium	current-global trends in IPR
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
	b) Contributing a scientific paper
	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
11 Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	Cultent Global trends in IPR
b) Date of conduct	OPPICE OF THE REGISTRAN
c) Level of Conference	State / National State / National State / National
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/-
e) Venue	Goa 6 DEC 2022
f) Copy of the sanction letter along-with Brochure to be enclosed	Sood P inward No. 32 Sign.
Note: The faculty member is eligible for financial support to attend one St	
12. Particulars of the financial support <u>previously</u> extended by the University	de la calendar year
a) Name of the Organizer	Centre for Excellence in Intellectual
b) Title of the program	property
c) Place	Goa.
d) Duration	62-days.
e) Date of Conference	02-days. 15-16th November 2012
f) Financial grant availed	13 16 10000111807 1812
1) speed	



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

	* /	pt samuel soul mes
13. Tra	velling (by shortest route) and other expenses involved	
		Particulars
a)	Place	Bim - Goa
b)	Mode of journey	Car
c)	Fare	500 -
d)	To and Fro	
e)	Accommodation charges	1200 -
f)	Registration / Delegation Fee	2000 -
g)	Air-port Tax	6700-
14. Do	cuments to be submitted:	84001
a)	Copy of the letter of invitation from the organizers.	
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	
		mark and his

DECLARATION

I hereby déclare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date 06 12 20 2 2

Signature of the faculty member

Date: 06 12 2022

Ref. No.

То

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

Seal BELAGAVI 590 010 Yours faithfully,

Principal ____

PRINCIPAL
KLE College of Pharmacy
BELAGAVL- 10.





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

	principal and the second of th	particular and the second seco	The same of the sa
A. To	be filled by the faculty memb	er:	
1. Nar	me	•	Mr. Sujay Huhalkar
2. Qua	alification		J M. Phaem
3. Des	signation		ASST. Protesser
4. Dep	partment	-	Phaima centros
5. Ema	ail ID	(4, 77)	Sigay, helyalker 5 @ gmael Com
6. Inst	itution		KLE COP Belacario
	e of joining the Institution (the feter minimum one year of service)		01/08/2019
8. Obje	ectives of the Conference / Ser	minar / Symposium	
	efits to be derived from particip nference / Seminar / Symposiur		Please enclose a separate sheet.
	signment in the aforesaid Conf nposium	erence / Seminar /	a) Delivering Key-note address / orations / plenary lectures
	Ф		b) Contributing a scientific paper
			c) International collaboration exchange program (only on invitation)
		1	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
		MAT gar	e) Others, if any, specify.
11. Pai	rticulars of the Conference <u>b</u>	eing attended	JPC-2023
a)	Title of the Conference / Sem	inar / Symposium	Accessto quality & Attordable Medical
b)	Date of conduct	indiana dan distanti manan distanti dianana ila una samanana ha na sa samanana	20-22 Jan - 2023
c)	Level of Conference	er ann an eann an an-an-an-an-an-an-an-an-an-an-an-an-an-a	State / National
d)	Quantum of financial grant eli expenses, whichever is less)	gible (or actuals	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e)	Venue	Address book about the representation of the representation of the control of the	RTM Name university Noopes
f)	Copy of the sanction letter ald be enclosed	ng-with Brochure to	Enclosed.
Vote:	The faculty member is eligible for finan	cial support to attend one St	ate / Zonal and one National Conference in a calendar year
	rticulars of the financial ended by the University	support previously	· NU
a)	Name of the Organizer		
b)	Title of the program	ALE Academy of Higher I & Research, BELAC	AVI — NA -
c)	Place	nut a wines a	-NA -
d)	Duration	0 9 FEB 202	
e)	Date of Conference	21	-NA-
		Inward NoSign.	

(Formerly known as KLE University) Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

aveiling (by shortest route) and other expenses involved **Particulars** Place Mode of journey b) TO NCIPPL Fare c) To and Fro d) Accommodation charges Registration / Delegation Fee g) Air-port Tax 14. Documents to be submitted: a) Copy of the letter of invitation from the organizers. attached attended certifica b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation. Poster presentation costilikate DECLARATION

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that ham liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date: 09 02 2023

Signature of the faculty member

Ref. No. KLE/COP/12/20/22/23

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

HOD, Pharmaceutics KLE College of Pharmacy BELAGAVI - 10.

Yours faithfully,

Principal

PRINCIPAL

KLE College of Pharmacy BELAGAVI - 590 010.

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956) Placed in Category 'A' by MoE (GoI)

Accredited A+ Grade by NAAC (3rd Cycle) JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 23012305

16th Jan.2023

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE College of Pharmacy, Belagavi.

With reference to the above, the request of Mr. Sujay Hulyalkar, Assistant Professor, Department of Pharmaceutices, KLE College of Pharmacy, Belagavi. For attending '72nd Indian Pharmaceutical Congress -2022' and also presenting paper entitled 'Development and Validation UV-Spectroprotometric Method for the Estimation of Felbinac in Marketed formulation and Cubosomal Nanoformulation' to be held Rashtrasant Tukadoji Maharaj Nagpur University, Nagpur, from 20th to 22nd January 2023, has been approved by the competent authority of the University.

The KAHFP shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Deemed-to-be University

Prof. Dr. V.A. Kothiwale Registrar

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE College of Pharmacy, Belagavai.
- 3. The Finance Officer, KAHER, Belagavi



(Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University th	rough the concerned HoD & Principal)
A. To be filled by the faculty member:	
N. W. H.	Dr. Bhaskar K. Kuvangi
F -Condition	M. Pharm., Ph.D.
Designation	Assistant Professor (grade-I)
· Peparioteta	Pharmaceutics
in temperate	
X DECEMBER	bhackar Kurangi 19@ gmail. com KLE College of Pharmacy, Bellowii
the anglesioning the Institution (the faculty should many labe mannium one year of service to avail this facility)	OI 108/2017 Pharmacy, Belogavi.
8 Objectives of the Conference / Seminar / Symposium	
Sanctile to be derived from participation in the aforesaid Sanctile ence / Seminar / Symposium	Please enclose a separate sheet.
Appendment in the aforesaid Conference / Seminar /	a) Delivering Key-note address / orations / plenary lectures
	b) Contributing a scientific paper
	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
Family along of the Conference being attended	
13 13 of the Conference / Seminar / Symposium	7000 Pudias Planas tind Constitution
b, the of conduct	72 nd Indian Pharmaceutical Congress, Nagpu January 20-22, 2023
या ॥ व्यक्षाव Conference	State / National 20 - 22, 2023
The Secretary of financial grant eligible (or actuals	State Level : Rs. 8.000/- National Level : Rs.16,000/-
e) Value	Rashtrasaut Tukadoji Maharaj Nagpur Univer
Decay of the sanction letter along-with Brochure to in unclosed	Enclosed. Nag peur
viewer. The latting member is eligible for financial support to attend one Si	tate / Zonal and one National Conference in a calendar year
E Paradustry of the financial support previously extends by the University	- NIL-
Name of the Organizer	
Tille of the program	
ty Please	
7 / · × · · · · · · · · · · · · · · · · ·	FICE OF THE REGISTRAR
The Ut Conference	E Academy of Higher Education & Research, BELAGAVI
redistribution availed	Notice remains and the same for
1 caren	R 9 FEB 2023
W ZM	

Inward No.

(Formerly known as KLE University) Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

	Particu	lars
Place - Belgaum - Miraj - Nagpur (Brus) = 17301-	= 17-301-
Mode of journey Nagpur - Pune (Air) -> A	Selgeen (Rond) = 4425 4	-2500 = 6921
, Ethe		4300 E 0314
Total charge B	elgam = Nagpur =	= 86551-
* Accommodation charges	3 days	2832
Segistration / Delegation Fee	60391-	+ 700 - 170
Air-port Tax	parties on responsible control of the second	posterprint.
observents to be submitted:	Total = 18,22	61-
The py of the letter of invitation from the organizers.	Enlosed.	nv .
Guery of the full text of documents / abstract / paper prepared by the applicant for presentation.		hiticate of present
DECLARA	TIXN	also enclose

- · Thave furnished the information in this application which is true to the best of my knowledge and belief.
- i lim not getting any financial assistance / support from the sponsorers / organizers of the Conference or any Their funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary uction by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- Firshall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- * i shall conduct a seminar for the benefit of the faculty members of the Department / institution to share the Many wedge and experience gained from attending the aforesaid Conference.

31/01/2023

Signature of the faculty member

KLEICOP/1221/2022/23

Date: 09/02/2023

The Registrar, KAHER, Belagavi.

Disac Sir

wa are enclosing herewith the application of the above Teacher in the prescribed format for grant of linations support to attend the International Conference outside India for kind consideration.

Thanking you,

Yours faithfully,

Signalure of the HoD

HOD. Pharmaceutics KLE College of Pharmacy BELAGAVI-10.

PRINCIPAL

KLE College of Pharmacy BELAGAVI - 590 010.

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A+ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (Gol) JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

MOFESSKINALS

31-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 23012306

16th Jan.2023

ORDER

Sub Permission to participate in the National Conference.

Request letter of the applicant forwarded through the concerned HoD, Ref

KLE College of Pharmacy, Belagavi.

With reference to the above, the request of Dr.Bhaskar K Kurangi, Assistant Professor, Department of Pharmaceutics, KLE College of Pharmacy, Belagavi. For attending '72nd Indian Pharmaceutical Congress -2022' and also presenting paper entitled 'Design and Evaluation of Berberine loaded cubosomal Nano formulation for the topical Treatment of ACNE' to be held Rashtrasant Tukadoji Maharaj Nagpur University, Nagpur, from 20th to 22nd January 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Higher Education Deemed-to-be University BELAGAN

Prof. Dr. V.A. Kothiwale Registrar

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE College of Pharmacy, Belagavai.
- 3. The Finance Officer, KAHER, Belagavi

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956) Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (Gol) JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 23012304

12th Jan.2023



ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE College of Pharmacy, Belagavi.

With reference to the above, the request of Dr.Pramod Hurkadale, Professor, Department of Pharmacognosy and Phytochemistry, KLE College of Pharmacy, Belagavi. For attending '72nd Indian Pharmaceutical Congress -2022' to be held Rashtrasant Tukadoji Maharaj Nagpur University, Nagpur, from 20th to 22nd January 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Higher Educatio Deemed-to-be University

Prof. Dr. V.A. Kothiwale

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE College of Pharmacy, Belagavai.
- 3. The Finance Officer, KAHER, Belagavi

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

. To be filled by the faculty member:	
	Prannod T. Hur Kadale
Name	M. Pharm, Ph.D., PACR
Qualification	Professor
3. Designation	Pharmacognosy.
1. Department	KIE College of Phannay, 14
5. Institution	beamod huratadle ayatro
6. Email ID	2004 oct
7. Date of joining the Institution	Enclosed as Annexure (1)
8. Objectives of the Conference / Seminar / Symposium	Please enclose a separate sheet.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	
10. Assignment in the aforesaid Conference / Seminar /	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture
Symposium	c) Others, if any specify. National New
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1s January to 31st December)	st va
a) Title of the Conference / Seminar / Symposium	160001
b) Date of conduct	
c) Level of Conference (State / Zonal / National)	
d) Venue	
e) Financial support extended by the University	OFFICE OF THE REGISTRAR
f) Copy of the sanction letter to be enclosed	KLE Academy of Higher Education 8 Research, BELAGAVI
Note: The faculty member is eligible for financia support to attend one State / Zonal and one Nation Conference in a calendar year.	al
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	Inward NoSign
a) Name of the Organizer	Ind Or in Diagranaceuts
b) Title of the program	72 Vindian Congress
c) Place	Nagpur Mahalasuka
d) Duration	20-22 Januar 32 102
	3-Days 20-29-Jan 201
e) Date f) Amount claimed	16,000 +00 only
19 23	3

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

1	penses involved towards attending the Conference:	
		Nagrur Return
a) b)	Mode of journey	Aux
	Fare	16750 = 00
	To and Fro expenses	1650 2 00 (Miscellamon
	Registration / Delegation Fee	conglimentary
	Accommodation charges	Confirmentary
	Total Expenses	18400 = 00
14. Do	cuments to be submitted:	
a)	Copy of the letter of invitation from the organizers.	Sudosed - Amexico
b)	su subset of decuments / shetract / nane	- Ammanere (
	DECLARA	TION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Date: 5-1-2023	Signature of the faculty member
Ref. No.	Date: 7 01 2023.
То	
The Registrar, KAHER,	

Belgaum. Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Signature of the HoD



Yours faithfully,

Principal **PRINCIPAL**

KLE College of Pharmacy BELAGAVI - 590 010.



KLE UNIVERSITY (Formerly known as KLE Academy of Higher

Education & Research)

Education & Research)

UNIVERSITY

EMPONERMS PROFESSIONALS

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	DR.PRADEEP KUMAR M. R.
2. Qualification	M.PHARM., Ph. D
3. Designation	ASSISTANT PROFESSOR
4. Department	PHARMACEUTICAL CHEMISTRY
5. Institution	K.L.E.UNIVERSITY'S COLLEGE OF PHARMACY, VIDYANAGR, HUBBALLI-580031
6. Date of joining the Institution	02-09-2016
7. Objectives of the Conference / Seminar / Symposium	APTICON-2022 is organized with a purpose of comprehending the vital role and importance of Pharmaceutical R&D in the development of novel drugs and dosage forms. It aims to impart scientific basis for integration of pharmacy and biological sciences to further contribute in development of patient oriented therapies. This conference offers a characteristic prospect for to know about the advancement in the field of designing and development of novel therapeutic moieties for various diseases.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Enclosed a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	Research Paper Presentation (ORAL).
10. Particulars of the financial support extended by the University on the previous occasion	
a) Title of the Conference / Seminar / Symposium	6 th International conference on Pharmaceutical R&D and Biopharmaceutics
b) Date of conduct	27 th and 28 th November, 2019 (02 days).
c) Venue	Holiday Inn Express Kuala Lumpur City Centre 84, Jalan Raja Chulan, Kuala Lumpur, 50200 Kuala Lumpur, Wilayah Persekutuan Kuala Lumpur, Malaysia
d) Financial support extended by the University	YES. Rs. 20,000/-
e) Copy of the sanction letter to be enclosed	ATTACHED
11. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	ASSOCIATION OF PHARMACY TEACHERS OF INDIA (APTI)
b) Title of the program	25th Annual National Convention -APTICON 2022

KLE UNIVERSITY (Formerly known as KLE Academy of Higher

Education & Research)

UNIVERSITY

LAWOMERNG PROFESSIONALS

[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

			•	
c)	Place	JSS College of Pharmacy, JSS AHER, Mysuru		
d)	Duration	2 nd to 4 th S	September, 2022 (03 days)	
12. Tra	avelling (by shortest route)and ôther e ed	xpenses		
			International	Domestic
a)	Place			Hubli To Mysuru
b)	Mode of journey			Train
c)	Fare			Rs. 1,000/-
d)	Registration / Delegation Fee			Rs. 3,540/-
e)	Accommodation/DA			Rs.1,800/-
f)	Air-port Tax			NA
		Total		Rs.6,340=00
13.Doc	uments to be submitted:			
	Copy of the letter of invitation from the o Copy of the full text of documents / pape by the applicant for presentation.		Enclosed	
14.Sign	ature of the faculty member		Mradeep Kun	ios)
Ref. No.	KIESCOPH APTI CONF 2022-	23/00-190	D	rate: 26/08/2022
То				
The Reg KLE Uni Belgaun	versity,			
Dear Sir				
٧	Ve are enclosing herewith the applicatio	on of the abo	ove Teacher in the prescri	bed format for grant of

financial support to attend the Conference outside India for kind consideration.

Thanking you,

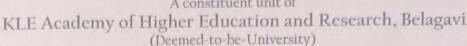
Yours faithfully,

soffennalli Signature of the HoD

KLES Considered Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Vidyanagar, HUBBALLI 580 031



Vidyanagar, HUBBALLI – 580 031, Karnataka A constituent unit of





■: 0836-2373174, Fax No.0836-2371048, Web: http://www.klecoph.edu.in, Email: principal.klescoph@gmail.com princpharmhbl@kledeemeduniversity.edu.in

Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Ms. Sushmita Hiremath, Asst. Prof. attended Workshop on Work place environment and Mental health, Organized by KLE College Of Pharmacy Belagavi 2022. She has received Rs.450/from the Institution/University.

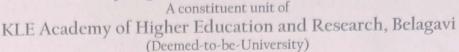


Principal Principa KLES College of Pharmacy (A constituent writ of KLE Academy of Higher Education & Research) Vidyanagar HUBBALLI 580 081

Accredited 'A+' Grade by NAAC (3nd Cycle) Placed in Category 'A' by MHRD (GoI) Recognized by Government of Karnataka B.Pharm. Course Accredited by National Board of Accreditation (NBA) Approved by Pharmacy Council of India (PCI) & All India Council for Technical Education (AICTE), New Delhi



Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of





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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Mrs. P.S. Akki attended Workshop on subject Startups and Innovations in Health Care Organized by Institute of Nursing Science, Belagavi 2022. She has received Rs.390/- from the Institution/University.



KLES College of Pharmacy A constituent unit of KLE ACK .- " of Higher Education & Research, Vidyanagar HUBBALLI 580 031

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Recognized by Government of Karnataka

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KLE EMPOWERING PROFESSIONALS

KLE COLLEGE OF PHARMACY

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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Mr. Harish K H, Associate Professor, attended Workshop on subject **Best Practice of OBE RTS Implementation and Success** for 2 days on 5th & 6th May, 2022 organized by Dept. of Pharmacology, KLE College of Pharmacy, Belagavi. He has received Rs.500/- from the Institution/University.



Principal
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Accredited 'A' Grade by NAAC (3nd Cycle)

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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Mr. S B Patil, Asst. Professor, attended Workshop on subject Best Practice of OBE RTS Implementation and Success for 2 days on 5th & 6th May, 2022 organized by Dept. of Pharmacology, KLE College of Pharmacy, Belagavi. He has received Rs.500/- from the Institution/University.



KLES College of Pharmacy (A constituent unit of KLE Academ) of Higher Estucation & Research) Vidyanagar MUBBALLI 580 884

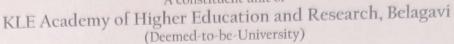
Placed in Category 'A' by MHRD (GoI) Accredited 'A+' Grade by NAAC (3nd Cycle) Recognized by Government of Karnataka B.Pharm. Course Accredited by National Board of Accreditation (NBA) Approved by Pharmacy Council of India (PCI) & All India Council for Technical Education (AICTE), New Delhi



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KLE COLLEGE OF PHARMACY

Vidyanagar, HUBBALLI – 580 031, Karnataka A constituent unit of





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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Dr. S B Nyamagoud, Asst. Professor, attended Workshop on subject **Best Practice of OBE RTS Implementation and Success** for 2 days on 5th & 6th May, 2022 organized by Dept. of Pharmacology, KLE College of Pharmacy, Belagavi. He has received Rs.500/- from the Institution/University.



Principal
Principal
RLES College of Pharmacy
(A constituent unit of KLE Academa
of Higher Education & Resear 7
Vidyanagar Hubball 580 03

Accredited 'A+' Grade by NAAC (3nd Cycle)

Placed in Category 'A' by MHRD (GoI)

Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Prof. Ravindra V Karadi attended Conference at Deshpande foundation held on 11th June 2022 Conducted by Deshpande foundation. He has received Rs.3000/- from the Institution/University for the Registration.



KLES College of Pharmacy (A constituent unit of KLE Academ) of Higher Education & Research) Vidyanagar HUBBALLI 580 031

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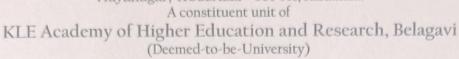
Placed in Category 'A' by MHRD (GoI)

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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Ms. Sushmita Hiremath, Asst. Prof. attended Workshop, entitled Molecular Biology of Infectious Diseases on 26th July 2022 organized by KAHER, BSRC Belagavi as a Delegate. She has received Rs.450/- from the Institution/University.



KLES College of Pharmacy (A constituent unit of KLE Acade 13) of Higher Education & Research) Vidyanagar HUBBALLI 580 03

Accredited 'A+' Grade by NAAC (3nd Cycle)

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Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2022

Ms. Sushmita Hiremath, Asst. Prof. attended Workshop entitled, Be An effective presenter, Presentation Skill Enhancement on 20th & 21st Oct. 2022 organized by KLE Institution of Physiotherapy, Belagavi as a Delegate. She has received Rs.450/- from the Institution/University.



KLES College of Pharmacy (A constituent unit of KLE Academ) of Higher Education & Research; Vidyanagar MUBBALLI 580 081

Accredited 'A+' Grade by NAAC (3nd Cycle)

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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Dr. Jaysheela S Hiremath, Asst. Prof. attended 4th National Pharm D. Colloquium Organized by Department of Pharmacy Practice KLE College of Pharmacy Belagavi on 24th & 25th March 2023 as a Delegate. She has received Rs1900/- from the Institution/University.



Principal KLES College of Pharmady (A constituent unit of KLE Academy of Higher Education & Research) Vidvanaom. HUBBALLI 580 031

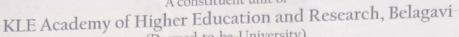
Accredited 'A+' Grade by NAAC (3nd Cycle) Placed in Category 'A' by MHRD (GoI) Recognized by Government of Karnataka B.Pharm. Course Accredited by National Board of Accreditation (NBA) Approved by Pharmacy Council of India (PCI) & All India Council for Technical Education (AICTE), New Delhi





SE

A constituent unit of



(Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Dr. Nisthul Stanyl, Asst. Prof. attended 4th National Pharm D. Colloquium Organized by Department of Pharmacy Practice KLE College of Pharmacy Belagavi on 24th & 25th March 2023 as a Delegate. He has received Rs1900/- from the Institution/University.



Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research)

Accredited 'A+' Grade by NAAC (3nd Cycle)

Placed in Category 'A' by MHRD (GoI)

Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)

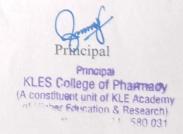


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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Dr. Bhavaya D B, Asst. Prof. attended 4th National Pharm D. Colloquium Organized by Department of Pharmacy Practice KLE College of Pharmacy Belagavi on 24th & 25th March 2023 as a Delegate. She has received Rs1900/- from the Institution/University.





Accredited 'A+' Grade by NAAC (3nd Cycle)

Placed in Category 'A' by MHRD (GoI)

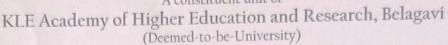
Recognized by Government of Karnataka

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A constituent unit of





En 2: 0836-2373174, Fax No.0836-2371048, Web: http://www.klescoph.org, Email: principal.klescoph@gmail.com princpharmhbl@kledeemeduniversity.edu.in

> Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Dr. Abhishek B J, Asst. Prof. attended 4th National Pharm D. Colloquium Organized by Department of Pharmacy Practice KLE College of Pharmacy Belagavi on 24th & 25th March 2023 as a Delegate. He has received Rs1900/- from the Institution/University.



Principal Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) H BBALLI 580 031

Accredited 'A+' Grade by NAAC (3nd Cycle) Placed in Category 'A' by MHRD (GoI) Recognized by Government of Karnataka B.Pharm. Course Accredited by National Board of Accreditation (NBA) Approved by Pharmacy Council of India (PCI) & All India Council for Technical Education (AICTE), New Delhi





A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. Neha Mali, Asst. Prof. attended Workshop entitled, From research to Publication: What Researcher Should Know on 13th March 2023 at JNMC Belagavi as a Delegate. She has received Rs625/- from the Institution/University.



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. S I Hiremath, Asst. Prof. attended Workshop entitled, From research to Publication: What Researcher Should Know on 13th March 2023 at JNMC Belagavi as a Delegate. She has received Rs625/- from the Institution/University.

Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research)

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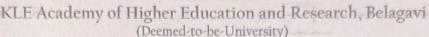
Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of





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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. Prabhu Shreya Ajay, Asst. Prof. attended Workshop entitled, Formulation & Optimization of Self Emulsifying Drug Delivery System 20th February 2023 organized by Department of Pharmaceutics KLE College of Pharmacy, Belagavi as a Delegate. She has received Rs825/- from the Institution/University.



Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) HUBBALLI 580 031

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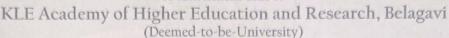
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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. P S Akki, Asst. Prof. attended Workshop entitled, Formulation & Optimization of Self Emulsifying Drug Delivery System 20th February 2023 organized by Department of Pharmaceutics KLE College of Pharmacy, Belagavi as a Delegate. She has received Rs825/- from the Institution/University.



rincipal Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Vidvanager, HUBBALLI 580 031

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Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





Vidyanagar, HUBBALLI – 580 031, Karnataka A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. Pooja Koganole, Asst. Prof. attended Workshop entitled, Basic Principles of Cell Culture Techniques on 10th & 12th January 2023 organized KAHER JN Medical College, Belagavi as a Delegate. She has received Rs2050/- from the Institution/University.



Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Vidvanapar, HUBBALLI 580 031

Accredited 'A+' Grade by NAAC (3nd Cycle)

Placed in Category 'A' by MHRD (GoI)

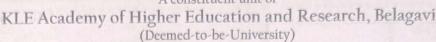
Recognized by Government of Karnataka

B.Pharm. Course Accredited by National Board of Accreditation (NBA)





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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. Sushmita Hiremath, Asst. Prof. attended Workshop entitled, Basic Principles of Cell Culture Techniques on 10th & 12th January 2023 organized KAHER JN Medical College, Belagavi as a Delegate. She has received Rs2050/- from the Institution/University.



Principa KLES College of Pharmacy (A constituent unit of KLE Academy inher Education & Research) THE MINISTER HUBBALLI 580 031

Accredited 'A+' Grade by NAAC (3nd Cycle) Placed in Category 'A' by MHRD (GoI) Recognized by Government of Karnataka B.Pharm. Course Accredited by National Board of Accreditation (NBA) Approved by Pharmacy Council of India (PCI) & All India Council for Technical Education (AICTE), New Delhi





Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of KLE Academy of Higher Education and Research, Belagavi (Deemed-to-be-University)



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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. Neha Mali, Asst. Prof. attended Workshop entitled, Basic Principles of Cell Culture Techniques on 10th & 12th January 2023 organized KAHER JN Medical College, Belagavi as a Delegate. She has received Rs2050/- from the Institution/University.



KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Vidvanager, HUBBALLI 580 031

Accredited 'A+' Grade by NAAC (3nd Cycle)

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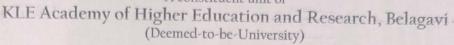
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Vidyanagar, HUBBALLI - 580 031, Karnataka A constituent unit of





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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Ms. A S Menasinakai, Asst. Prof. attended Workshop entitled, Basic Principles of Cell Culture Techniques on 10th & 12th January 2023 organized KAHER JN Medical College, Belagavi as a Delegate. She has received Rs2050/- from the Institution/University.



Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Vidvanager, HUBBALLI 580 031

Accredited 'A+' Grade by NAAC (3nd Cycle)

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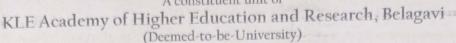
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Teachers Provided with Financial Support to Attend Conferences/Workshops and Towards Membership Fee of Professional Bodies During the Year - 2023

Mr. Harish K H, Asst. Prof. attended Workshop entitled, Basic Principles of Cell Culture Techniques on 10th & 12th January 2023 organized KAHER JN Medical College, Belagavi as a Delegate. He has received Rs2050/- from the Institution/University.



Principal KLES College of Pharmacy (A constituent unit of KLE Academy of Higher Education & Research) Viuvanager, HUBBALLI 580 031

Accredited 'A*' Grade by NAAC (3nd Cycle)

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B.Pharm. Course Accredited by National Board of Accreditation (NBA)





(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty	member:	
1. Name		DR, SUBHAS S KARKI
2. Qualification		Ph D.
3. Designation		Professor
4. Department		Pharmaustical Chimister
5. Institution		KLE College of Pharmacy Bengali
6. Email ID		subhasskarkiegmast, con
7. Date of joining the Institution	n	27/03/1996
8. Objectives of the Conference	ce / Seminar / Symposium	Endome-1
9. Benefits to be derived from Conference / Seminar / Sy		Please enclose a separate sheet. Enclose 2
10. Assignment in the aforesa Symposium	aid Conference / Seminar /	a) Contributing a scientific paper (poster or oral)b) Delivering a guest lecturec) Others, if any, specify.
by the University to at	ial support already extended tend the similar Conference calendar year 1 st January to	No
a) Title of the Conference	e / Seminar / Symposium	
b) Date of conduct		16000/1
c) Level of Conference (State / Zonal / National)	
-,	Otate / Zonar/ Hationar)	
d) Venue	Ciate / Zonar/ National)	
d) Venue	ended by the University	
d) Venue	ended by the University	
d) Venue e) Financial support extension f) Copy of the sanction Note: The faculty memb	ended by the University letter to be enclosed let is eligible for financial te / Zonal and one National	
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty memb support to attend one State	ended by the University letter to be enclosed let is eligible for financial te / Zonal and one National ear.	
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty members support to attend one State Conference in a calendar year. 12. Particulars of the organ	ended by the University letter to be enclosed er is eligible for financial te / Zonal and one National ear. dizers of the aforesaid Symposium	
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty membersupport to attend one State Conference in a calendar year. 12. Particulars of the organ Conference / Seminar / S	ended by the University letter to be enclosed let is eligible for financial te / Zonal and one National ear. lizers of the aforesaid Symposium	Schoolinger & BITS Goacan International Confusion on Drug
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty membersupport to attend one State Conference in a calendar year. Conference / Seminar /	ended by the University letter to be enclosed er is eligible for financial et / Zonal and one National ear. lizers of the aforesaid Symposium er	Schoolinger & BITS Goacang International Conference on Drug Discourse (ICDD-2022)
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty members support to attend one State Conference in a calendar year. 12. Particulars of the organized Conference / Seminar / Sem	ended by the University letter to be enclosed let is eligible for financial te / Zonal and one National ear. lizers of the aforesaid Symposium	Schrodinger & BITS Goacang International Conference on Drug Goa Two days (10/11/2022 - 11/11/20
d) Venue e) Financial support exter f) Copy of the sanction Note: The faculty memb support to attend one State Conference in a calendar year. 12. Particulars of the organic Conference / Seminar	letter to be enclosed or is eligible for financial te / Zonal and one National ear. sizers of the aforesaid Symposium or OFFICE OF THE REGISTRAL to Farademy of illahor Education	Schoolinger & BITS Goacang International Confuence on Drug Siscorry (SC DD-2022) Goa



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956] -2-

13. Ex	penses involved towards attending the Conference:	
	Place	GOA
b)	Mode of journey	Air
c)	Fare	10)1
	To and Fro expenses	0/5/ ***
	Registration / Delegation Fee	9651=00
	Accommodation charges	6300 200
	Total Expenses	
14. Do	cuments to be submitted:	19452=00
	Copy of the letter of invitation from the organizers.	
b)	Copy of the full text of documents / abstract / paper	Endone - 4
	prepared by the applicant for presentation.	Entona - 4
Date : Ref. No. To The Reg KAHER,	istrar,	dance / Participation Certificate within fifteen days to the rence, members of the Department / Institution to share the resaid Conference.
Belgaum Dear Sir,	•	
W	e are enclosing herewith the application of the abo	ve Teacher in the prescribed format for great of
ıınancıaı	support for presentation scientific paper (poster or ce for kind consideration.	oral) / delivering a guest lecture to attend the
	nanking you,	
		Yours faithfully,
Signature	of the HoD	Principal Principal



KLE Academy of Higher Education & Research, Belagavi [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F. 9-19/2000-U.3 (A)]

APPLICATION FOR LEAVE (Other than Casual Leave / Restricted Leave) (To be submitted through proper channel)

1. Name of the applic	ant	DIM	PLE PIRGA	+L
2. Designation		Assist	rest Prox	266-
3. Name of the Depar	tment	Thurma	certical Ce	emish
4. Name of the Institu		KLEC	rent Projection Ce certical Ce op, Benga	hore
5. Contact details		: Mahile Na	7964922	715
6. Nature of appointm	nent		dated / Re-appointed /	
	y/Permanent/Probation			Contract
8. Date of joining the		7/7/20	monent	
9. Particulars of lea		7/7/201	ь	
a) Type of Leave		Specie	I casual les	in
b) Period of Leave		Ol days	rom 9/4/202	anejou -
d) Reasons for availi	ng the leave	Comin	1011 11/202	majah Universit
	Special Casual Leave, please enclose proo	g A-001	ich William	naigh Unitersit
Place : Bengaluru	,	# Sharmore	hiw haum	nile fight
Date 8/4/222		Audin	in conder Dir	aple propor
	nmendations of the Head of	the Donartment	oignatur	e of the applicant
During the leave	requested by the applic			t recommended.
			Designation A	kt-projem
Data Plut) shall look after the du	ties of the applicar	it faculty.	1/5
Date 8/4/1024	-			
11 For Office Head	Callana		Signati	re of the HoD
11. For Office Use at	College:		4	+
11. For Office use at	College:	T		
Type of Leave	Leave balance	Leave	No. of Days	laava
	_	Leave Applied for	No. of Days Leave recommended	Leave Balance
	Leave balance		Leave	
Type of Leave	Leave balance as on the date of application		Leave	
Type of Leave Date	Leave balance as on the date of application Verified by (Sign.)		Leave recommended	
Type of Leave	Leave balance as on the date of application Verified by (Sign.)	Applied for	Leave recommended Signature	Balance
Type of Leave Date 12. For University Off	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is	Applied for Seal	Leave recommended Signature of the above facu	Balance
Type of Leave Date 12. For University Off	Leave balance as on the date of application Verified by (Sign.)	Applied for Seal	Leave recommended Signature of the above facu	Balance f the Principal
Date 12. For University Off Hon. Vice-Chancellor, as p	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is	Applied for Seal	Leave recommended Signature Signatu	f the Principal
Date 12. For University Off Hon. Vice-Chancellor, as p Date:	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is per BL Rule No. 26 (k&I) un	Applied for Seal sanctioned to toder MOA of the KLE	Signature Signature Signature Signature of the above facultiversity.	f the Principal Ity member by
Date 12. For University Off Hon. Vice-Chancellor, as p Date: Note: 1. The Faculty shall submit 2. The University shall submit	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is per BL Rule No. 26 (k&I) un the leave application in the prescribed formatic consider any application involving past f	Seal Seal Sanctioned to toder MOA of the KLE	Signature Signature Signature Signature of the above facultiversity.	f the Principal Ity member by
Date Date 12. For University Off Hon. Vice-Chancellor, as p Date: The faculty shall submit of the faculty shall avail of the faculty who intended the faculty who inte	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is leave as above is leave BL Rule No. 26 (k&I) un If the leave application in the prescribed formation involving post of the Earned Leave for a minimum period of discounds shall to avail leave for medical wounds shall to avail leave on medical wounds.	Seal Seal Sanctioned to toder MOA of the KLE Stat least 10 days in advance actors anction / approval 10 days	Signature of the above facultiversity. Signature of the above facultiversity.	f the Principal Ity member by If the Registrar
Date 12. For University Off Hon. Vice-Chancellor, as p Date: The Faculty shall submit The University shall avail The Faculty who inten- cose of liness in Serga	Leave balance as on the date of application Verified by (Sign.) Tice use: Leave as above is ber BL Rule No. 26 (k&I) under the leave application in the prescribed formatic consider any application involving post if the Earned Leave for a minimum period of discovered the earned Leave for a minimum period of discovered the earned Leave for a minimum period of discovered the earned Leave for a minimum period of discovered the earned Leave for a minimum period of discovered the earned Leave for a minimum gual um) and from a Doctor with minimum gual um gual from a Doctor with gual from a Doctor with gual from a Doctor with gual from a	Applied for Seal Sanctioned to toder MOA of the KLE It at least 10 days in advance acto sanction / approval 10 days 11 submit Medical Certification of MBBS (in case)	Signature of the above faculturiversity. Signature of the above on medicate from KLE Dr. Prab of illness ourside Balance of the above facultures of the above of the above facultures our side above fa	f the Principal Ilty member by f the Registrar al grounds).
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Date 12. For University Off Hon. Vice-Chancellor, as p Date: Note: 1. The Faculty shall submit 2. The University shall availt 4. The Faculty who inten- case of liness in Beiga 5. The concerned Ready, engible to be compidered 6. The Faculty shall not	Leave balance as on the date of application Verified by (Sign.) lice use: Leave as above is ber BL	Applied for Seal Sanctioned to to der MOA of the KLE It at least 10 days in advance acto sanction /approval 10 days. I submit Medical Certific lification of MBBS (in case he constituent units shall after) # Regulations of from the University.	Leave recommended Signature of the above faculturiversity. Signature of the University. Signature of the University of Illness outside Belag forward only those applif the University.	Balance If the Principal Ilty member by If the Registrar al grounds). hakar Kore Hospital (in avi). lications which are
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Date 12. For University Off Hon. Vice-Chancellor, as p Date: Interpretable of the faculty shall submit The faculty shall avail The faculty who intentions of the faculty shall not proposed faculty shall not proporting faculty shall not proporting occurrent.	Leave balance as on the date of application Verified by (Sign.) Tice use: Leave as above is ber BL	Applied for Seal Sanctioned to to der MOA of the KLE at least 10 days in advance acto sanction /approval 10 days. I submit Medical Certificiality and the constituent units shall objecty / Rules & Regulations of from the University twave not exceeding 15 did the same in excess of the approval for grant of two	Signature of the above faculturiversity. Signature of the above faculturiversity. Signature of the second of the soutside Belag forward only those applies the University. The University of the Second of the University. The Second of the Second of the University of the Second of	Balance If the Principal Ilty member by If the Registrar al grounds). hakar Kore Hospital (in avr). ilications which are tion of necessary thority of the University.
Date 12. For University Off Hon. Vice-Chancellor, as p Date: Interpretable of the faculty shall submit The faculty shall avail The faculty who intentions of the faculty shall not proposed faculty shall not proporting faculty shall not proporting occurrent.	Leave balance as on the date of application Verified by (Sign.) Tice use: Leave as above is ber BL	Applied for Seal Sanctioned to to der MOA of the KLE at least 10 days in advance acto sanction /approval 10 days. I submit Medical Certificiality and the constituent units shall objecty / Rules & Regulations of from the University twave not exceeding 15 did the same in excess of the approval for grant of two	Leave recommended Signature of the above faculuriversity. Signature of the competence of the University of the University. Signature of the University of the University. Signature of the University of the University.	Balance If the Principal Ilty member by If the Registrar al grounds). hakar Kore Hospital (in avr). ilications which are tion of necessary thority of the University.



KLE Academy of Higher Education & Research, Belagavi [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F. 9-19/2000-U.3 (A)]

APPLICATION FOR LEAVE

(Other than Casual Leave / Restricted Leave)
(To be submitted through proper channel)

		Day 1	akshmi Gayathni M
1. Name of the applican	t	Acristo	nt professor
2. Designation		Dharmac	y practice
3. Name of the Departn	nent	KIE COLL	J ' N
4. Name of the Institution	on		
5. Contact details		: Mobile No. 1	
6. Nature of appointme	nt	^	ated / Re-appointed / Contract
7. whether Temporary/	Permanent/Probation	1 .	rmanent
8. Date of joining the Ir	nstitution	05/10/2	020
9. Particulars of leav	e applied for:		. 100
a) Type of Leave		Special	leave (OD
b) Period of Leave		days Fro	om 9/4/2022 to
d) Reasons for availing	ig the leave	Seminal a	
	pecial Casual Leave, please enclose proof.	" phauma	recutical Industy - Headenin
Place : Bengaluru			Dr. Lakehui
Date 8/4/2012			Signature of the applicant
	nmendations of the Head of t	he Department:	
		ant is recomn	
	, , , , , , , , , , , , , , , , , , , ,		Designation Ast professor
20	period,		
, ,) shall look after the dut	les of the applican	i R A
Date 84/102			Signature of the HoD
11. For Office Use at	College:		
			No. of Days
Tues of Logyo	Leave balance	Leave	Leave Leave
Type of Leave	as on the date of application	Applied for	recommended Balance
			0 ;
Date	Verified by (Sign.)	(Seal)	Signature of the Principal
12. For University Of	fice use:		
	Leave as above is	sanctioned to	the above faculty member by
Hon. Vice-Chancellor, as	per BL, Rule No. 26 (k&I) ur	ider MOA of the KL	E University.
Date :			Signature of the Registrar
Note:			
The Faculty shall subm	it the leave application in the prescribed form not consider any application involving post-	at at least 10 days in adva	nce (except Leave on medical grounds). I
1 1 1 1 - 1	Lab - Farand Lagua for a minimum period o	f 1() days	
4. The Faculty who inte	nd to avail leave on medical grounds sha	all submit Medical Cert alification of MBBS (in ca	ificate from KLE Dr. Prabhakar Kore Hospital (in ase of illness outside Belagavi).
5 The sees and Head	s of the Departments and the Principals of ed by the University as per the existing Leave	the constituent units sh	all forward only those applications which are
c TI - C - Is -b-II	t and of leave without prior approve	al from the University.	1
7. The faculty shall be	eligible to lavail Special Casual Leave / Duty	/ Leave not exceeding 1: ail the same in excess 0	5 days in a year, on production of necessary fthe prescribed limit.
8. The salary during th	e leave period shall be sanctioned only aft	ter approval for grant of	leave by the competent authority of the Univers
/	= 00		,

Principal KLE College of Pharmacy Bengaluru-560 010



KLE Academy of Higher Education & Research, Belagavi [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F. 9-19/2000 U.3 (A)]

APPLICATION FOR LEAVE

(Other than Casual Leave, "Restricted Leave) (Labe committed through proper channel)

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	/Permanent/Probation	Pern	aneut	The second section of the second section of the second section of the second section of
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9 Particulars of lea				
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r (Period of Leave		02 days Fr	om 02/09/22	50 03/09/22
Reasons for availi	ng the leave	Allentin	APTION	:003/09/22 Contreve
	Special Casual Leave, please enclose proof.		-	7
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30/08/22			Signature	e of the applicant
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Principal
KLE College of Pharmacy
Bengaluru-560 010



KLE Academy of Higher Education & Research, Belagavi [Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F. 9-19/2000-U.3 (A)]

APPLICATION FOR LEAVE (Other than Casual Leave / Restricted Leave) (To be submitted through proper channel)

 Name of the applicant Designation Name of the Departm Name of the Institution Contact details Nature of appointment whether Temporary/P Date of Joining the Institution 	ent n t ermanent/Probation	: Mobile No. 9	agya V atl proportion Pho op, Beng 188022093 idated/Re-appointed/I	10
9. Particulars of leave a) Type of Leave b) Period of Leave d) Reasons for availing	e applied for:	"// !!	1 1 1	\$22 Dayanaro
Place: Bengaluru Date 2 11/22 10. Remarks/ recommendate	mendations of the Head of	the Department	t:	recommended.
Oate 27 11 52 11. For Office Use at C	Leave balance	ies of the applica	Y	re of the HoD
SCL	as on the date of application	Applied for	recommended	Balance
12. For University Office Hon. Vice-Chancellor, as pe	_ Leave as above is		the above facu	f the Principal
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Principal KLE College of Pharmacy
Bengaluru-560 010

Welcome
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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

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	2. Benefits to be derived aforesaid Conference / 9	from participation in the	Please enclose a separat	
	aloresald conterence /	Jennal / Symposium	Choose File No file chos	en
	3.Assignment in the afo	resaid Conference / Seminar	a) Delivering key-note address/orations/plena	ary lectures
			b) Contributing the sci	entific paper
			c) Chairing a scientific	session
			d) International collabo exchange program(onl	
			e) Panel discussion or talks/lectures or invited arts/skills(only on invit	d to discuss
			f) Others, if any, specif	у.
	C.Particulars of the conference being attended	(NO Y		
	a) Title of the Conference / Seminar / Symposium		b) Date of conduct	dd-mm-yyyy
	c) Venue		d) Financial support extended by the University	Amount dd-mm-yyyy
	e. Quantum of financ	ial grant		
	l) State :Rs 8,000/-		II) National :Rs 16,000/-	
	f) Copy of the sanction letter to be enclosed	View File		
	Note : The faculty membe Conference in a calendar	r is eligible for financial suppo year.	ort to attend one State / Zona	l and one National
	D.Particulars of the organ	izers of the aforesaid Confere	nce / Seminar / Symposium	
	a) Name of the Organizer	Indian Association of I	b) Title of the program	Annual Conference
	c) Place	Kolkata	d) Duration	2 V
	e) Date of conference	07-05-2022	f) Financial grant	25000

- Application
- Final Approved List
- User Master
- Bank Details
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AMOUNT CLAIM LIST

Sr.No	Title	Estimated Amount	Claimed Amount	Upload Receipt
1	Registration / Delegation Fee	25000	4700.00	View
2	To and Fro expenses	25000	15589.00°	<u>View</u>
3	Accommodation charges	25000	0.00	<u>View</u>
4	Other charges finance	25000	0.00	View
	Total	100000	20289	
			Deny	ADDRIVE

		В	ank Details	
Sr.No	Bank Name	Acc Holder Name	Acc Number	Ifsc Code
1	Canara bank	SANJIV KUMAR	5042010039164	CNRB0010504



From. Dr Deepa Metgud Professor and HOD Pediatric Physiotherapy KAHER Institute of Physiotherapy

To, The Registrar, KLE Academy of Higher Education and Research Belagavi

Date-18/05/2022

ps/400/ Nahalloyen

[Through Proper Channel]

Sub: Request for release of incentives for participating as resource person and chairing a scientific session at national conference held in Chennai.

Respected Sir,

With reference to subject cited above, I would like to inform you that I was invited as a resource person and chairperson for scientific session at national conference of Society of Indian Physiotherapist(SIP) held at Chennai, from 29th April-1st May 2022. I had obtained permission for the same and received an email approval for provision of the incentives from the university.

I request your kind self to release the financial assistance for the same. I hereby attach the details of expenditure along with the bills for your reference

Kindly do the needful Thanking you

Yours sincerely

Dr Deepa Metgud

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI 2 N MAY 2022

Ref. NO: KAHERI

Enclosed - 1 - Expenditure details and Account details

& Research, BELAGAVI 2- Bills related to Expenditure

FINANCE SECTION 3- Certificates

0 8 JUN 2022

Perith on per nome

Date-18/05/2022

From. Dr Anand Heggannavar **Associate Professor** Department of Orthopaedic Manual Therapy KAHER Institute of Physiotherapy

Belagavi

To, The Registrar, KLE Academy of Higher Education and Research Belagavi

By proton cet [Through Proper Channel]

Sub: Request for release of incentives for attending and presenting a scientific paper at national conference held in Chennai.

Respected Sir,

With reference to subject cited above, I would like to inform you that I attended and presented a scientific paper at national conference of Society of Indian Physiotherapist (SIP) held at Chennai, from 29th April- 1st May 2022. I had obtained permission for the same and received an email approval for provision of the incentives from the university.

I request your kind self to release the financial assistance for the same. I hereby attach the details of expenditure along with the bills for your reference

Kindly do the needful Thanking you

Yours sincerely

Dr Anand Heggannavar

M: KAHBRIKIPT/22-23/214

Date: 2015/22

Enclosed – 1 – Expenditure details and Account details

2- Bills related to Expenditure

KLE Academy of Higher Education Certificates

& Research, BELAGAVI FINANCE SECTION

Inward No. 028 Slan.

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI

Z O MAY 2022



From,

Dr Vinuta Deshpande Assistant Professor Dept of Pediatric Physiotherapy KAHER Institute of Physiotherapy Belagavi

To,

The Registrar, KLE Academy of Higher Education and Research Belagavi

[Through Proper Channel]

National Conferme. - Rollinol.

Sub: Request for release of incentives for participating as resource person in a scientific session at national conference 6th Annual Conference "SIPCON" held in Chennai.

Respected Sir,

With reference to subject cited above, I would like to inform you that I was invited as a resource person for scientific session at national conference of Society of Indian Physiotherapist(SIP) held at Chennai, from 29th April- 1st May 2022. I had obtained permission for the same and received an email approval for provision of the incentives from the university.

I request your kind self to release the financial assistance for the same. I hereby attach the details of expenditure along with the bills for your reference

Thanking you in Anticipation

Yours Sincerely

[Dr. Vinuta D]

Ref. NO: KAHER |KIPT | 22-23 | 216 Date: 23/05/22

Enclosed:

- 1. Summary of Expenditure
- 2. Invitation to be a Resource person in the Conference
- 3. Tax Invoice for the Flight
- 4. Flight Boarding Pass
- 5. Per head charges for the flight

6. Hotel Accommodation Bill

& Research Celbead charge for the hotel accommodation

FINANCECEFFIcate of Attendance and Resource Person

7077

Inward No.0.30

spernon keller

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI

From.

Dr Shukra Chivate

Assistant Professor

Pediatric Physiotherapy Department

KAHER Institute of Physiotherapy

To,

The Registar,

KLE Academy of Higher Education and Research

Belagavi

* Certificate of Paper presentation to missing * Poston Lynn Notion Lynn

Date-18/05/2022

[Through Proper Channel]

Sub: Request for release of incentives for attending and presenting scientific paper at national conference held in Chennai.

Respected Sir,

With reference to subject cited above, I would like to inform you that I attended and presented a scientific paper at national conference of Society of Indian Physiotherapist(SIP) held at Chennai, from 29th April- 1st May 2022. I had obtained permission for the same.

I request your kind self to release the financial assistance for the same. I hereby attach the details of expenditure along with the bills for your reference

Kindly do the needful

Thanking you

Yours sincerely

Dr Shukra Chivate

OFFICE OF THE REGISTRA KLE Academy of Higher Education

Date: 2015/22

Ref, NO: KAHERIKIPT/22-23/212

KLE Academy of Higher Education & Research, BELAGAVI

FINAPLE Expenditure details and account details

2. Bills related to expenditure

Inward No. 0.31..8ign.....

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Ref. NO: KAHER | KIPT 122-23 / 358



From

Dr. Raiu Gadad Assistant Librarian

KAHER, Institute of Physiotherapy-Belagavi

To;

Registrar

KLE Academy of Higher Education & Research

Belagavi

Through Proper Channel

Subject:- Regarding Reimbursement of Conference Expenditure

Respected Sir;

I Under Signed Dr. Raju Gadad working as an Assistant Librarian at KAHER, Institute of Physiotherapy-Belagavi, attended the One Day National conference on "Transformation of Higher Education Libraries in the Digital Environment" organized by the Library and Information Centre of Dnyanprassarak Mandal's College and Research Centre, in association with Goa College Librarians' Association (GCLA) & Karnataka State College Librarians' Association (KSCLA) on 17th June, 2022, and also presented a paper entitled "Examining Bradfords' Law of Scattering in Prof. CNR Rao's Publication: A Scientometric Study. Thus hereby requesting you to kindly reimburse the amount 2475/-, which I have spent for the conference.

Thanking you





Shan

(Presenting Paper)

(Felicitating the Paper Profile OF THE REGISTRAN KLE Academy of Higher Education & Research, BELAGAVI

Date: 22-06-2022

Place: Belagavi

Z 2 JUN 2022

Encl:

1. Bills

2. Conference Certificate

Yours' Faithfullyof Higher Education & Research, BELAGAVI FINANCE SECTION

JUN 2022

Welcome

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

finance LIST (HTTPS://FLIXIRSOLUTIONS.COM/FIN_ASSIST/INDEX.PHP/CORE/ASS_LIST) Application (https://flixirsolutions.com/fin assist/index.php/Core/ass_list) A. To be filled by the faculty member: Final Approved List (https://flixirsolutions.com/fin assist/index.html.com/fin assist/inde 2 Name 3. Qualification 4. Designation 101117002 DR JEBA CHITRA SELVA KUN MPT Teaching Staff User Master (https://flixirsolutions.com/fin_assist/index.ghp/Core/User_page) 7. Email Id 8. Date of joining the 6. Institution Institution Bank Details Neurology KLEU Institute Of Physiotherap iebachitra@hotmail.com 11/07/2004 (https://flixirsolutions.com/fin_assist/index.php/Core/Bank_Details) Change Password B. Particulars and assignment in the conference: (https://flixirsolutions.com/fin assist/index.php/Core changepass) ≜ Logout 1. Objectives of the Conference / Seminar / Symposium View File (https://filxirsolutions.com/fin_assist/index.php/Core/admin_logout)
Premary Lectures and Discussions on Physiotherapy and Rehabilitatio (https://flixirsolutions.com/fin_assist/uploads/161c2f476ddb55_Beni fits.docx) 2. Benefits to be derived from participation in the aforesaid Please enclose a separate sheet. Conference / Seminar / Symposium Choose File No file chosen a) Delivering key-note address/orations/plenary 3.Assignment in the aforesaid Conference / Seminar / Symposium lectures b) Contributing the scientific paper c) Chairing a scientific session d) International collaboration exchange program(only on invitation) e) Panel discussion or to deliver talks/lectures or invited to discuss arts/skills(only on invitation) f) Others. if any. specify. C.Particulars of the (YES conference being attended a) Title of the Conference / 6th Annual Conference of Sc b) Date of conduct 07/01/2022 Seminar / Symposium Bills not attitud d) Financial support NIL c) Venue Chennai extended by the University 07/01/2022 e, Quantum of financial grant eligible I) State :Rs II) National :Rs 16.000/-(1) 8,000/f) Copy of the sanction View File (https://flixirsolutions.com/fin letter to be enclosed assist/uploads/161c2f476d e85d Sanction Letter.docx) Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year. D.Particulars of the organizers of the aforesaid Conference / Seminar / Symposium a) Name of the Organizer Society of Indian Physiothera b) Title of the program 6th Annual Conference of Sc d) Duration c) Place Chennai 07/01/2022 f) Financial grant sought 16000 e) Date of conference E. Expenses involved towards attending the Conference: a) Place Chennai b) Mode of Journey By Air Amount in Rs 9780.00 d) To and For exp. 3000.00 c) Fare f) Accommodation 0.00 e) Registration / 4720.00 charges **Delegation Fee Total Expenses** g) Other charges 0.00 17500.00 F. Documents to be submitted:

View File

(https://flixirsolutions.com/fin_assist/uploads/161c2f476de929_SIP

a) Copy of the letter of invitation from the organizers.

copy of the full text of documents / abstract / paper prepared by the applicant for presentation.

INVITE.pdf)

View File

(https://flixirsolutions.com/fin_assist/uploads/161c2f476deac0_Ses

sion Chair.docx)

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- 1 shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility

Accept terms and conditions

Date:

22/12/2021

Comments

Name 1	Comment	
	Dr. Approved as per the University norms, the Veerappa incentives will be released after the submissi of the original bills.	
2	Dr. Approved as per the University norms, the Veerappa incentives will be released after the submissi of the original bills,	
3	Dr. Approved as per the University norms, the Veerappa incentives will be released after the submissi of the original bills.	

To.
The Registrar,
KAHER,
Belgaum.

Dear Sir.

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Yours faithfully,

Signature of the HoD Principal

Add Your Comment Here Comment

Send For Approval

3

From,
Dr. Snehal Dharmayat
Associate Professor and HOD
Community Physiotherapy
KAHER Institute of Physiotherapy,
Belagavi.

To,
The Registrar,
KLE Academy of Higher Education and Research
Belagavi.

[Through Proper Channel]

Sub: Request for release of incentives for participating as chair for scientific session at national conference held in Chennai.

Respected Sir,

With reference to subject cited above, I would like to inform you that I was invited as a chairperson for scientific session at national conference of Society of Indian Physiotherapist(SIP) held at Chennai, from 29th April- 1st May 2022. I had obtained permission for the same and received an email approval for provision of the incentives from the university.

I request your kind self to release the financial assistance for the same. I hereby attach the details of expenditure along with the bills for your reference.

Kindly do the needful.

Thanking you

Yours sincerely

Dr. Snehal Dharmayat

Ref. NO: KAHERIKIPT 122-23/217 Oate: 23/5/

°le

Enclosed - 1 - Expenditure details and Account details

2- Bills related to Expenditure

3- Certificates

PB.

Details of Expenses

mal	Nature of Expenses	Amount in RS	Bill Enclosed
10	Travel charges	Rs. 14296/-	Yes
2	Accommodation charges	Rs. 6350/-	Yes
3	Conference Registration	Rs. 5900/-	Yes
		Rs. 26546	

Account Details

Name – Snehal Dharmayat

Bank – Canara Bank

Bank Branch – Nehru Nagar

Back Ac/no - 05042010025835

IFSC code - CNRB0010504

Pan No- AJEPD4622J



INSTITUTE OF PHYSIOTHERAPY

A Constituent Unit of

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Declared as Deemed -to-be-University u/s 3 of the UGC Act, 1956)

Accredited 'A+' Grade by NAAC (3rd Cycle) Placed in Category 'A' by MHRD (Gol)

NEHRU NAGAR, BELAGAVI - 590010, KARNATAKA, INDIA

Office -0831-2473906, Fax - 0831 -2474727

email: principalkipt@gmail.com, Web: klekipt.edu.in

Ref. No/KAHER/ KIPT/22-23 1835

Date: 12/11/2022

To, The Registrar, KAHER, Belagavi.

Sub: - Regarding financial assistance for attending conference by staff members.

Sub: - Regarding initialitial assistance for accounting of the Person of

Sir,

With reference to the subject cited above, I am forwarding herewith the application of the below mentioned Teaching Staff for grant of financial assistance for attending conference by faculty members.

Sl	Department	Name of the Staff	Designation
No 1	Geriatric	Dr. Anil Muragod	Professor
2	OMT	Dr. Pamela D'silva	Assistant Professor

8000/-

Kindly acknowledge receipt of the same.

Thanking you,

Yours truly,

PRINCIPAL,

KLE INSTITUTE OF PHYSIOTHERAPY,

BELAGAVI.





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A SECULAR SEASON AND A SECULAR

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR GRANT OF CASH INCENTIVE FOR PRIZE WINNING PRESENTATIONS AT NATIONAL / INTERNATIONAL LEVEL / PATENT (To be submitted to the University through the concerned HOD & Principal)

A.	To be filled by the Applicant / Presenter:		
	Name of the Presenter	Dr An:1 Mur	agod
2.	Name (s) and details of other Authors		0
3.	Whether the Presenter is Faculty / PG Student/Research Scholar	Faculty Professor 4	,
4.	Designation / Course & Specialty of the Applicant	Professor & Gereature P	
5.	Registration No. (Student)		
6.	Department	Creviatric P	hysiatherapy
7.	Institution	FLE Institute	of Physiotherap
8.	Email ID	granilbysio D.	kle kipt. edu.in
9.	Mobile No.	91646949	
10.	Nature / Type of presentation (Please specify whichever is applicable) Paper / Posters / Quiz competition	As a Spe	aker
11.	Name of the organization conducting the Conference (should be recognized by International/National Professional Bodies)	1 .	eriatice Orthopassi Lia GOSICOH 2
12.	Type of the award applied for (Tick whichever applicable)		
•			
		National Level	International Level
	1 st Prize	/	International Level Rs.7,500/-
*	CLOOOL	National Level	
	1 st Prize	National Level Rs.4,500/-	Rs.7,500/-
	1 st Prize 2 nd Prize	Rs.4,500/- Rs.3,000/- Rs.1,500/- 1. Certificate of Organizing Comm 2. Brochure showir claimant and pape	Rs.7,500/- Rs.4,500/- Rs3,000/- ward issued by the ittee. Ing the name of the r/poster the time of receiving the the presentation with
	1 st Prize 2 nd Prize 3 rd Prize Enclosures (attested copies)	Rs.4,500/- Rs.3,000/- Rs.1,500/- 1. Certificate of A Organizing Comm 2. Brochure showing claimant and pape 3. Photograph at the Certificate. 4. Abstract/Copy of mames of all the and	Rs.7,500/- Rs.4,500/- Rs3,000/- ward issued by the ittee. Ing the name of the r/poster the time of receiving the the presentation with
13.	1 st Prize 2 nd Prize 3 rd Prize Enclosures (attested copies)	Rs.4,500/- Rs.3,000/- Rs.1,500/- 1. Certificate of A Organizing Comm 2. Brochure showing claimant and pape 3. Photograph at the Certificate. 4. Abstract/Copy of mames of all the and	Rs.7,500/- Rs.4,500/- Rs3,000/- ward issued by the ittee. Ing the name of the r/poster e time of receiving the the presentation with ithors.



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APPLICATION FOR GRANT OF CASH INCENTIVE FOR PRIZE WINNING PRESENTATIONS AT NATIONAL / INTERNATIONAL LEVEL / PATENT (To be submitted to the University through the concerned HOD & Principal)

	To be filled by the Applicant / Presenter:		NIC. VA
	Name of the Presenter	PAMELA VIRGIL Ankita Pujar, Ad	L' Shah, Akhin
	Name (s) and details of other Authors	Ankita rigar, no	Should
	Whether the Presenter is Faculty / PG Student/Research Scholar	faculty - ASSIS	tant Prof
1.	Designation / Course & Specialty of the Applicant	Faculty-Assistant PROF	HS10 THEFAPY
5.	Registration No. (Student)		THE STATE OF THE S
6.	Department		OIC MANUAL THERA
7.	Institution	KAMER. INSTITUTE	of physiotherap
8.	Email ID	pameladeilva @ k	lekipt.edu.In
9.	Mobile No.	135359479	3
10.	Nature / Type of presentation (Please specify whichever is applicable) Paper / Posters / Quiz competition	PAPER PRESENT	anadornais Matter 1 agree 1 400 1
11.	International/National Professional Bodies) Trans of the award applied for (Tick whichever applicable)	COLLEGE SO	vasth ayu.
12	Type of the award app	National Level	International Level
	1st Prize 8000	Rs.4,500/-	Rs.7,500/-
	1 THE	Rs.3,000/-	Rs.4,500/-
_	2 nd Prize	Rs.1,500/-	Rs3,000/-
13		1. Certificate of A Organizing Commi 2. Brochure claimant s 3. Photograp Certificate 4. Abstract/Copy names of all the au	thors.
1	4. Innovations which receive Patent		f the relevant documents
	a) Indian Patent	Rs.15,000/-	
	b) International Patent	Rs.25,000/-	



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Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D-

05/2221

03rd December, 2022



ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE Institute of Physiotherapy, Belagavi.

With reference to the above, the request of **Dr.Snehal Dharmayat**, Associate Professor, Department of Community Physiotherapy, KLE Institute of Physiotherapy, Belagavi.. For attending '8th International Symposium on ICF and also Invited as resource person for (Panel Discussion and deliver a lecture) to be held at Mohali, Punjabi from 30th November to 2nd December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to be The University Selection

Prof. Dr. V.A. Kothiwale Registrar

Kill

To,

The above staff member.

CC to:

- 1. The PA to Hon. Chancellor, KAHER, Belagavi.
- 2. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 3. The Principal, KLE Institute of Physiotherapy, Belagavi
- 4. The Finance Officer, KAHER, Belagavi





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[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	Dr. Snehal Dhaemanat
2. Qualification	MPP, PHPE
3. Designation	Associate Perfessor.
4. Department	Constructor David Holson
5. Institution	Partitute of Planta Language
6. Date of joining the Institution	1112002
7. Objectives of the Conference / Seminar / Symposium	Dit education & keenich
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
10. Particulars of the financial support extended by the University for the 1 st time to attend the similar Conference (s) during the current financial year (1 st April to 31 st March)	pommettee mondbes
a) Title of the Conference / Seminar / Symposium	hatignal conference of soling
b) Date of conduct	30 April, 18th & 2nd Way dos
c) Venue	Chonna 1
d) Financial support extended by the University	RA 16:000 -//
e) Copy of the sanction letter to be enclosed	
Particulars of the organizers of the aforesald Conference / Seminar / Symposium	
a) Name of the Organizer	
b) Title of the program	8th Assortional PIPC
c) Place	Molacli Princes
d) Duration	3 000
e) Date	30 Nev - 2nd Dec 2020



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12. Expenses involved towards attending the Conference:	
a) Place	Rose Uphali
b) Mode of journey	Charles August
c) Fare	- Hugus
To and Fro expenses	D5 11 100 - 1 (1)
Registration / Delegation Fee	100 1 + 6,000 - Atronada
Total Expenses	012000
13. Documents to be submitted:	12 22,5001-
 a) Copy of the letter of invitation from the organizers. b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation. 	
University from the date of attending the aforesaid Cont	
• I shall reimburse the amount to the University in excess	of the eligibility.
ate: 22 U2022 Sign Registrar, E University,	roresaid Conference.
ate: 22 \ \(\frac{1}{2022}\) Signs Registrar,	gnature of the faculty member
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APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES

1. Name	T 0
2. Qualification	Dr. Prashant Naih
3. Designation	Manters in Physiotherman
4. Department	Assistant Rad
5. Institution	Community Physiather 181
5. Date of joining the Institution	
Objectives of the Conference / Seminar / Sympos	sium ethi.
Benefits to be derived from participation in the aformation of the conference / Seminar / Symposium	sium 8th loteuration 1866
Conference / Seminar / Symposium	presaid Please enclose a separate sheet.
Assignment in the aforesaid Conference / Ser Symposium	
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Particulars of the financial support extended by University for the 1st time to attend the	The state of the s
(1 st April to 31 st March)	year
Title of the Conference / Seminar / Symposium Date of conduct	
) Venue	
Financial support extended by the University	
orticulars of as	
articulars of the organizers of the aforesaid	16000
articulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer	16000
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articulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer	8th International Summer Chandigarh
articulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer Title of the program	8th International Symposium on 14 F Rayat 4 Bahara University Chandigarh
ocpy of the sanction letter to be enclosed articulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer Title of the program Place Duration	8th International Symposium on 14 F Rayat 4 Bahara University Chandigath
Name of the Organizer Title of the program Place Duration	8th International Symposium on 14 F Rayat 4 Bahara University Chandigath. 30th Nov. 1st 4 2nd December 2012
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(Formerly known as KLE Academy of Higher Education & Research)
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12. Ex	penses involved towards attending the Conference:	
a)		Chandigarh
	Mode of journey	Elelk
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	Registration / Delegation Fee	11.24.000
	Total Expenses	1-5 2,400 ft
13. Do	cuments to be submitted:	4526.400-
a)	Copy of the letter of invitation from the organizers.	
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	
11	DECLARAT hereby declare that :	TON
	• I have furnished the information in this application which i	s fruit to the hest of my knowledge and halfas
	o I am not getting any financial assistance / support from	the sponsorers of the Conference or any other funding
	agency for attending the aforesaid Conference,	
	I shall produce necessary pills / receipts along-with Attend University from the date of attending the aforeseld Conference	dance / Participation Certificate within fifteen days to the
	 I shall conduct a seminar for the benefit of the farally 	members of the Department / Invitation to above the
	 I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the afor 	ence, members of the Department / Ir stitution to share the esaid Conference.
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ef. No. o he Reg LE Univelgaum ear Sir, W ancial	of I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aform I shall reimburse the amount to the University in excess of the latter of the lat	members of the Department / Ir stitution to share the esaid Conference. If the eligibility. Date: Teacher in the prescribed format for grant of in.
ef. No. o he Reg LE Univelgaum ear Sir, W ancial	of I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aform I shall reimburse the amount to the University in excess of the latter of the lat	members of the Department / Ir stitution to share the esaid Conference. If the eligibility. Date: Teacher in the prescribed format for grant of in.
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KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH
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[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

A. To be filled by the faculty member:	rough the concerned HoD & Principal)
1. Name	DR. PEEYOOSHA GURUDUT
2. Qualification	MPT, (Ph.D)
3. Designation	Associate Professor
4. Department	Oxthopedic Physiotherapar
5. Email ID	preyposhagundit & Klekipt odu
6. Institution	KAHER Institute of Musichery
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	
8. Objectives of the Conference / Seminar / Symposium	Non-phasmacological approach to Ob
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesald Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
	b) Contributing a scientific paper
COSTILL AND IN	c) International collaboration exchange program (only on invitation)
as listing	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
h, b, do h	e) Others, if any, specify.
11. Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	SWASTHAYU 2622
b) Date of conduct	17th - 19th November 2022
c) Level of Conference	State / National / International
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	KLE BMK Aguireda Mahari
f) Copy of the sanction letter along-with Brochure to be enclosed	Enclosed
Note: The faculty member is eligible for financial support to attend one S	tate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	the state of the s
a) Name of the Organizer	
b) Title of the program	
c) Place	and the same of th
d) Duration	The second secon
e) Date of Conference	The second of th
f) Financial grant availed	State of the state



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University)

[Deemed-to-be-University establ	
13. Travelling (by shortest route) and other expenses involved	
and other expenses involved	NONE
a) Place	Particulars
b) Mode of journey	Belagani
the angular and a superference a	
Company Control of the Control of th	
d) To and Fro	
e) Accommodation charges	
f) Registration / Delegation Fee	13.3,000
9) Air-port Tax	The state of the s
4. Documents to be submitted:	and the second s
a) Copy of the letter of invitation from the organizers. Copy of the full to the first term of the first term	0 1
 b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation. 	Enclosed.
 I hereby declare that: I have furnished the information in this application which is I am not getting any financial assistance / support from other funding agency for attending the aforesaid Confere action by the University in case it is found at a I application is wrong / false, in support of my application 	the sponsorers / organizers of the Conference or al noe. I am aware that I am liable for any disciplina ater stage that the information furnished in the
I hereby declare that: I have furnished the information in this application which is I am not getting any financial assistance / support from other funding agency for attending the aforesaid Confered action by the University in case it is found at a lapplication is wrong / false, in support of my application. I shall produce necessary bills / receipts along-with Attend University from the date of attending the aforesaid Conference.	s true to the best of my knowledge and belief. the sponsorers / organizers of the Conference or an acc. I am aware that I am liable for any disciplinal atter stage that the information furnished in the on for financial grant. ance / Participation Certificate within fifteen days to the once.
I hereby declare that: I have furnished the information in this application which is I am not getting any financial assistance / support from other funding agency for attending the aforesaid Confere action by the University in case it is found at a lapplication is wrong / false, in support of my application. I shall produce necessary hills / receipts along with the conference.	s true to the best of my knowledge and belief. the sponsorers / organizers of the Conference or an acc. I am aware that I am liable for any disciplinal atter stage that the information furnished in the on for financial grant. ance / Participation Certificate within fifteen days to the once.
I hereby declare that: I have furnished the information in this application which is I am not getting any financial assistance / support from other funding agency for attending the aforesaid Confered action by the University in case it is found at a lapplication is wrong / false, in support of my application. I shall produce necessary bills / receipts along-with Attend University from the date of attending the aforesaid Conference. I shall conduct a seminar for the benefit of the faculty in knowledge and experience gained from attending the aforests.	s true to the best of my knowledge and belief. the sponsorers / organizers of the Conference or a nce. I am aware that I am liable for any disciplina ater stage that the information furnished in th on for financial grant. ance / Participation Certificate within fifteen days to the ance. members of the Department / Institution to share the asaid Conference.
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(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

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Ref. No. KAHER-/2022-23/D- 01 02 7312

25th January, 2023



ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD, KAHER

Institute of Physiotherapy, Belagavi

With reference to the above, the request of Dr. Sanjiv Kumar, Principal, KLE Institute of Physiotherapy, Belagavi, For attending 'International Conference of Physical Therapy'(ICPT)-2023 to be held Ramsheth Thakur International Sports complex, Ulwe, Navi Mumbai, from 28th and 29th January 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University & BELAGAN'*

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KAHER Institute of Physiotherapy, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.

INSTITUTE OF PHYSIOTHERAPY

A Constituent Unit of

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Declared as Deemed -to-be-University u/s 3 of the UGC Act, 1956) Placed in Category 'A' by MHRD (Gol) Accredited 'A+' Grade by NAAC (3rd Cycle)

NEHRU NAGAR, BELAGAVI - 590010, KARNATAKA, INDIA

Office -0831-2473906, Fax - 0831 -2474727

email: principalkipt@gmail.com, Web: klekipt.edu.in

Ref. No/KAHER/ KIPT/22-23/1079

Date: 24/01/2023

To, The Registrar, KAHER. Belagavi.

Sub: - Grant of financial assistance for attending the International Conference at Mumbai.

Ref: - Your letter No. KAHER/2019-20/D - 280220002, dated 20th February 2020.

Sir,

With reference to the subject cited above, I am forwarding herewith the application for grant of financial assistance for attending as a resource person at International Conference of Physical Therapy [ICPT] -2023 on 28th & 29th January 2023 at Mumbai.

Kindly acknowledge the same.

Thanking you,

Yours truly,

Principal,

KLE Institute of Physiotherapy,

Belagavi.

BELAGAV

OFFICE OF THE KLE Academy of Higher Education & Research, BELACAVI Inward Nommannusign

Encl: Prescribed format along with supportive documents.

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Formerly known as KLE Academy of Higher Education & Research)

Applished under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal).

A. To be filled by the faculty member:	
1. Name	Dr. Sanjivkumar
Qualification !	MPT, Ph.D
Designation	Principal
, Department	Neuro-Physiotherapy
. Institution	KLE, Enstitute of Phys, other apy. Belaga
Date of joining the Institution	05-06-2000
Objectives of the Conference / Seminar / Symposium	Reconnect Physiotherapy world Pis
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet. Resource Person Covis
Assignment in the aforesaid Conference / Seminar / Symposium	a) Chairing a scientific session. b) Contributing a scientific paper (poster or oral) c) Delivering a guest lecture d) Others, if any, specify.
O. Particulars of the financial support extended by the University for the 1 st time to attend the similar Conference (s) during the current financial year (1 st April to 31 st March)	(6000)
a) Title of the Conference / Seminar / Symposium	59th [AP International Conference
b) Date of conduct	6th to 9th May 2022
c) Venue	Kolkata
d) Financial support extended by the University	
e) Copy of the sanction letter to be enclosed	
Particulars of the organizers of the aforesald Conference / Seminar / Symposium	
a) Name of the Organizer	
b) Title of the program	
c) Place	
d) Duration	
e) Date	

(Formerly known as KLE Academy of Higher Education & Research)
[Established under Section 3 of the UGC Act, 1956 vide Government of India Notification No.F.9-19/2000-U.3(A)]

12. Expenses involved towards attending the Conference:	
12. Exhauses myorked fowards strending the Couleteuce:	
a) Place	Mumbas
b) Mode of journey	Car
c) Fare	18/1cm
To and Fro expenses	17,000 /
Registration / Delegation Fee	NIL
Total Expenses	17,000 -
3. Documents to be submitted:	
 a) Copy of the letter of invitation from the organizers. b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation. 	
DECLARAT I hereby declare that :	ION
옷동보는 일 시간을 보다면 주시되는 사람들이 되는 사람들은	
I have furnished the information in this application which is a larger facting any financial applications / support face.	
 I am not getting any financial assistance / support from agency for attending the aforesaid Conference, 	the sponsorers of the Conference or any other funding
• I shall produce necessary oills / receipts along-with Attended	dance / Participation Certificate within fifteen days to th
University from the date of attending the aforesaid Confer	
• I shall conduct a seminar for the benefit of the faculty	members of the Department / Institution to share th
knowledge and experience gained from attending the afor	esaid Conference.
 I shall reimburse the amount to the University in excess o 	f the eligibility.
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KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH
(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	De Basavahai Motimal
2. Qualification	Associate Phot MM (Ph)
3. Designation	Asso Photo Hot
4. Department	3 Ponts
5. Email ID	bsmotimoth@yahoo.in.
6. Institution	KAYER Institute of Physioth
7. Date of joining the institution (the faculty should complete minimum one year of service to avail this facility)	07/07/2006.
8. Objectives of the Conference / Seminar / Symposium	The state of the s
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11. Particulars of the Conference being attended	
a) Title of the Conference / Seminar / Symposium	13 Osteopathy & Manual Th (
b) Date of conduct	20/11/2022
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs. 16,000/-
e) Venue	New Tethis.
f) Copy of the sanction letter along-with Brochure to be enclosed	Or cen
Note: The faculty member is eligible for financial support to attend one S	tate / Zonal and one National Conference in a calendar year
12. Particulars of the financial support <u>previously</u> extended by the University	-NIL -
a) Name of the Organizer	
b) Title of the program	
c) Place	
d) Duration	No. of the control of
e) Date of Conference	
f) Financial grant availed	The contract of the contract o



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

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. Travelling (by shortest route) and other expenses involved	Particulars
a) Place	New Delhi
b) Mode of journey	By Aih.
c) Fare	4996:
d) To and Fro	15 939
e) Accommodation charges	2500 - Penday
f) Registration / Delegation Fee	1850/-
g) Air-port Tax	
4. Documents to be submitted:	
a) Copy of the letter of invitation from the organizers. b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	
action by the University in case it is found at a	n the sponsorers 7 dignizers of the ence. I am aware that I am liable for any disciplin later stage that the information furnished in tion for financial grant.
I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe	ition for financial grant. Indance / Participation Certificate within fifteen days to be a rence. Index members of the Department / Institution to share
I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aforesaid.	ntion for financial grant. Indance / Participation Certificate within fifteen days to be arence. Index members of the Department / Institution to share
I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aforesaid Date: 14 2022 Signature S	ntion for financial grant. Indance / Participation Certificate within fifteen days to be service. Indance / Participation Certificate within fifteen days to be service. Institution to share oresald Conference.
I shall produce necessary bills / receipts along-with Atter University from the date of attending the aforesaid Confe I shall conduct a seminar for the benefit of the faculty knowledge and experience gained from attending the aforesaid Date: 1	ndance / Participation Certificate within fifteen days to be prence. y members of the Department / Institution to share oresaid Conference. gnature of the faculty member
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From
Dr Dhaval Chivate
Assistant Professor
KAHER Institute of Physiotherapy
KAHER Belagavi

To The Registrar KAHER Belagavi

(Through proper Channel)

Subject: Financial Assistance to attend and present a scientific paper at international conference in Delhi on 20th November 2022

Respected sir,

With reference to subject cited above I am pleased to inform you that my paper for platform presentation is been selected at an international conference organised by academy of exercise health and therapy in collaboration with Osteopro – Association for professional osteopaths of Italy, dated 20th NOV 2022. A kind request to provide financial assistance to attend and scientific paper presentation as per the university norms.

Kindly oblige and do the needful

Thanking you in anticipation

Yours sincerely



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH
(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned Had & Principles

A. To be filled by the faculty member:	
1. Name	DR Thaval Chivate
2. Qualification	MPT
3. Designation	Assistant Phot
4. Department	A STATE OF THE PARTY OF THE PAR
5. Email ID	William Committee and Committe
5. Institution	
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	20 07/2015
B. Objectives of the Conference / Seminar / Symposium	Mark State of the
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Scientific Phesentodion Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
Particulars of the Conference being attended	1st Ostcopothy Manual The Conte
a) Title of the Conference / Seminar / Symposium	20/11/2022
b) Date of conduct	the state of the s
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/_
e) Venue	National Level Rs.16,000
f) Copy of the sanction letter along-with Brochure to be enclosed	Var Vola
te: The faculty member is eligible for financial support to attend one Sta	ta / Zonal and an Al-
Particulars of the financial support previously extended by the University	20 rai and the National Conference in a calendar year
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b) Title of the program	MAN STANDARD CONTRACTOR OF THE STANDARD CONTRACT
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(Formerly known as KLE University) .
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

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13. Travelling (by shortest route) and other expenses involved	
	Particulars
a) Place	New Yelling
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e) Accommodation charges	2500 - penday
f) Registration / Delegation Fee	1850 1 - A
g) Air-port Tax	
14. Documents to be submitted:	
a) Copy of the letter of invitation from the organize	ers.
b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	paper
DECLAI	RATION
I hereby declare that :	
I have furnished the information in this application w	which is true to the best of my knowledge and holief
 i am not getting any financial assistance / support other funding agency for attending the aforesaid Co 	rt from the sponsorers / organizers of the Conference or any Conference. I am aware that I am liable for any disciplinary
	Attendance / Participation Certificate within fifteen days to the
	aculty members of the Department / Institution to share the
Date: 08 (1 2022	Signature of the faculty member
Ref. No.	Date:
To	
The Registrar, KAHER, Belagavi.	
Dear Sir,	
We are enclosing herewith the application of the a financial support to attend the international Conference of	above Teacher in the prescribed formet for grant of outside India for kind consideration.
Thanking you,	& RESEARON Yours faithfully,
Criotimoto BE	Yours faithfully, Seal VI Principal
Signature of the HoD	Principal
	W * Add Harry

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 2501 2309

23rd January, 2023



ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE Institute of Nursing Sciences, Belagavi.

With reference to the above, the request of Mr. Jagadeesh G Hubballi, Assistant Professor Department of Child Health Nursing, KAHER Institute of Nursing, Belagavi. For attending 'International Conference-2023 theme (Emerging Competencies in Midwifery and Neinatal Practics; The Nursing Perspective) to be held BVDU, Medical College and Hospital Auditorium, Sangli from 11th and 12th January, 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University

* BELAGIN'*

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE Institute of Nursing Sciences, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	20 5 4
2. Qualification	Mr. Jagadeesh G. Hubballi
3. Designation	M-scca)
4. Department	Assistant Producesor
5. Institution	Child Realth Newsmy
6. Email ID	KAKER Institute of Dy Schener Bel
7. Date of joining the Institution	jagadeerhhuldsalliogniett.com
8. Objectives of the Conference / Seminar / Symposium	Awarexes of health loteraray in monter
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
 Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) 	
a) Title of the Conference / Seminar / Symposium	Emerging competences in moderatory
b) Date of conduct	LIM & 12th January 2023
c) Level of Conference (State / Zonal / National)	International
d) Venue	Bharatt Madyaneets contlege of
e) Financial support extended by the University	Disg slongle maharand
f) Copy of the sanction letter to be enclosed	
lote: The faculty member is eligible for financial upport to attend <u>one State / Zonal</u> and <u>one National conference in a calendar year.</u>	
Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	Bharati Wayapur College of dun of
b) Title of the program	Interestrate conference
c) Place	Sough maharatha
d) Duration	2 days
e) Date	11th fir the January 2023
f) Amount claimed	John Wis



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

-2-

13. Exp	enses involved towards attending the Conference:	
, a)	Place	Songly malorastra.
b)	Mode of journey	France by own velocite
c)	Fare	
	To and Fro expenses	P1. 2000 -
	Registration / Delegation Fee	Ro. 1800 -
	Accommodation charges	Pr. 2100
	Total Expenses	pr. 59001
14. Do	cuments to be submitted:	
a)	Copy of the letter of invitation from the organizers.	A Hadmest Enclosed
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	

DECLARATION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Date: 17/01/2023

Signature of the faculty member

Gleon

Ref. No. KAHER INS 2022-23 10-912

Date: 19/01/2023

То

The Registrar, KAHER, Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Signature of the HoD

BEBEAG VI

Yours faithfully,

Principal

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 25012311



23rd January, 2023

ORDER

Sub

Permission to participate in the International Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE Institute of Nursing Sciences, Belagavi.

With reference to the above, the request of Mr.Umesh Nandagaon, Assistant Professor Department of Child Health Nursing, KAHER Institute of Nursing, Belagavi. For attending 'International Conference-2023 theme (Emerging Competencies in Midwifery and Neinatal Practics; The Nursing Perspective) to be held BVDU, Medical College and Hospital Auditorium, Sangli from 11th and 12th January, 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.



Prof. Dr. V.A. Kothiwale

Kell

To. The above staff member.

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE Institute of Nursing Sciences, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	MR. UMESH. NANDAGAON
2. Qualification	M.Sc (NURSING)
3. Designation	ASSISTANT PROFESSOR
4. Department	CHELD HEALTH NURSING
5. Institution	KAHER INSTITUTE OF NURLIN SCIENCES BELAUAVE
3. Email ID	umesh 223048 agmail. com
7. Date of joining the Institution	18.12.2014 AWARENESS OF HEMITH LITERAL
8. Objectives of the Conference / Seminar / Symposium	IN MATERIAL S NEONATH CARE.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
11. Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1 st January to 31 st December)	(1)80
a) Title of the Conference / Seminar / Symposium	MEDWIFERY & NEDWATH PRACTICE.
b) Date of conduct	11th & 12th JANUARY 2023
c) Level of Conference (State / Zonal / National)	INTERNATIONAL
d) Venue	BHARATI VIDYAPEETH COLLEGE OF NURLENG, SANGLE
e) Financial support extended by the University	
▶ f) Copy of the sanction letter to be enclosed	
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference in a calendar year.</u>	
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	COLLEGE OF NURSENY.
b) Title of the program	INTERNATIONAL CONFERENCE
c) Place	SANGLE MAHARASHTRA.
d) Duration	2 DAYS
e) Date	11th & 12th JANUARY 2023
★ f) Amount claimed	



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

- 2 -

13. Expenses involved towards attending the Conference:	
a) Place	SANCIE MANUELLE
b) Mode of journey	SANGLE MANARASHTRA
c) Fare	TRAVEL BY OWN VEHELAL
To and Fro expenses	P3. 2000 - 00
Registration / Delegation Fee	Ps. 1800 - 00
Accommodation charges	B 2100 UD
Total Expenses	D
4. Documents to be submitted:	Ps. 5,900-00
a) Copy of the letter of invitation from the organizers.	
b) Copy of the full text of documents / abstract / paper	ATTACHMENT
prepared by the applicant for presentation.	ENCLOSED.

DECLARATION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Date: 17-01-2023

Signature of the faculty member

Date: 19|01|20

Ref. No. KAHER | 108/2092-23/D-912

То

The Registrar, KAHER,

Belgaum.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Signature of the HoD

BEISAGAVI

Yours faithfully.

Principal

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956) Accredited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A

redited A⁺ Grade by NAAC (3rd Cycle) Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

*: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D-25012308

23rd January, 2023



ORDER

Sub : Permission to participate in the International Conference.

Ref : Request letter of the applicant forwarded through the concerned HoD,

KLE Institute of Nursing Sciences, Belagavi.

With reference to the above, the request of Mrs. Nirmala Dsouza, Assistant Professor Department of OBG Nursing, KAHER Institute of Nursing, Belagavi. For attending 'International Conference-2023 theme (Emerging Competencies in Midwifery and Neinatal Practics; The Nursing Perspective) to be held BVDU, Medical College and Hospital Auditorium, Sangli from 11th and 12th January, 2023, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University

* BELAGAN**

Deemed-to-be University

* BELAGAN**

To, The above staff member.

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KLE Institute of Nursing Sciences, Belagavi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:	
1. Name	MRS. NIRMALA D'SOUZA
2. Qualification	M.SC (MORSING)
3. Designation	ASSISTANT PROFESSOR
4. Department	OBG HORSING
5. Institution	KAHER INITITUTE OF NURSMY
6. Email ID	nirmala d 802 @gmail. wm.
7. Date of joining the Institution	01.08.2012
8. Objectives of the Conference / Seminar / Symposium	AWARENESS OF HEALTH LITERACY IN MATERIAL & MEDINATAL HEALTH.
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
Assignment in the aforesaid Conference / Seminar / Symposium	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
 Particulars of the financial support already extended by the University to attend the similar Conference (s) during the current calendar year 1st January to 31st December) 	Approved A
a) Title of the Conference / Seminar / Symposium	MIDDIFERY & NEONATA PRACTICE
b) Date of conduct	11th 4 12th JANUARY 2023
c) Level of Conference (State / Zonal / National)	INTERNATIONAL.
d) Venue	BHARATI NIDYAPEETH LOLLEGE OF NURSING, SANGLE,
e) Financial support extended by the University	
f) Copy of the sanction letter to be enclosed	
Note: The faculty member is eligible for financial support to attend <u>one State / Zonal</u> and <u>one National Conference</u> in a calendar year.	
12. Particulars of the organizers of the aforesaid Conference / Seminar / Symposium	
a) Name of the Organizer	BHARATI VIDYAPEETH COLLEGE OF
b) Title of the program	INTERNATIONAL CONFERENCE
c) Place	SANGLE MAHARASHIRA.
d) Duration	2 DAY ,
e) Date	11th 4 12th JANUARY 2023
f) Amount claimed	



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13. Expenses involved towards attending the Conference:	
a) Place	LANGLE MAHARASHTRA
b) Mode of journey	
c) Fare	TRANGE BY DION VEHICAL.
To and Fro expenses	ls 2000 00
Registration / Delegation Fee	R. 1800 - 00
Accommodation charges	Li 2100:00
Total Expenses	Ps 5,900 · 03 M
14. Documents to be submitted:	
a) Copy of the letter of invitation from the organizers.	0
 b) Copy of the full text of documents / abstract / paper prepared by the applicant for presentation. 	AFFACHMENT ENCLOSED

DECLARATION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers of the Conference or any other funding agency for attending the aforesaid Conference,
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference,
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.
- I shall reimburse the amount to the University in excess of the eligibility.

Signature of the faculty member

Ref. No. KAHER [INS | 2022-23 | D-912

Date: 19/01/2023

To

The Registrar. KAHER. Belgaum.

Dear Sir.

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support for presentation scientific paper (poster or oral) / delivering a guest lecture to attend the Conference for kind consideration.

Thanking you,

Yours faithfully

Principal



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

(10 be submitted to the officers) and	The second control of
A. To be filled by the faculty member:	
1. Name	De Supriya. J Kulkarni
2. Qualification	Boomes m. O (Hornes partry)
3. Designation	Associate Puojessos
4. Department	Homoeopoethic prateria modica
5. Email ID	Kulkarnijsupsiya 30 @gmail.com
6. Institution	KLE HOMOEOPATHY, MEDICAL COLLE
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	1/5/2018
8. Objectives of the Conference / Seminar / Symposium	Emergency Medicine, Cardology-dife of
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper (Postex pure) c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.
11. Particulars of the Conference being attended	SEASON AND TRANSPORTER
a) Title of the Conference / Seminar / Symposium	DEXUS 2022 NATIONAL SEMIN 24th and 25th June 2022.
b) Date of conduct	State / National
c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	MNR Auditorium MNR AHER Compu Hydrabad Telangana
Copy of the sanction letter along-with Brochure to be enclosed	
Note: The faculty member is eligible for financial support to attend one S	State / Zonal and one National Conference in a calendar year
12. Particulars of the financial support previously extended by the University	
a) Name of the Organizer	
b) Title of the program	
c) Place	
d) Duration	•
e) Date of Conference	
f) Financial grant availed	-



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[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

13. Tra	velling (by shortest route) and other expenses involved	
		Particulars
a)	Place	Hyclas bad
b)	Mode of journey	Train.
c)	Fare	
d)	To and Fro	724-7401-
e)	Accommodation charges	64001-
f)	Registration / Delegation Fee	1500/- +300/-
g)	Air-port Tax	-
4. Do	cuments to be submitted:	
a)	Copy of the letter of invitation from the organizers.	2
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Poster Paresentation

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date: 17 6 2022	Signature of the faculty member Liquiga 5 kulkou
Ref. No.	Date: 17 6 22.
То	
The Registrar, KAHER, Belagavi.	
Dear Sir,	
Mo one endesing becautiful the english	tion of the observe Touches in the supposed and form of the

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Yours faithfully,

Signature of the HoD

HOD

Department of Materia Medica KLE University's H.M.C. & Hospital Belagavi.

Bringipalpal

KLE Homoeopathic Medical College & Hospital BELAGAVI



KLE Homoeopathic Medical College & Hospital

(Recognised by Central Council of Homoeopathy, New Delhi, M/o AYUSH, Gol) A Constituent Unit of



KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(Declared as Deemed-to-be-University u/s 3 of the UGC Act, 1956)

Yellur Road, Belagavi – 590 005, Karnataka, India

0831-2413863, (Extn: 1262 / 1263) Website: www.klehomoeo.edu.in E-mail: prinhomeo@kledeemeduniversiy.edu.in

Ref. No: KAHER/HMC/22-23/D-

Dt.07/07/2022

To, The Registrar KAHER. BELAGAVI.

> Sub: Reimbursement of expenses spent for attending and Poster Presentation in National Seminar (Nexus 2022) at Hyderabad Reg. Through proper channel.

Respected Sir'

With reference to the subject cited above, I Dr. Nagaraja Havalada, Associate Professor, Dept. of Organon of Medicine attended the National Seminar (Nexus) held on 24th and 25th June 2022 at Hyderabad. I had presented a poster. I request you for reimbursement of expenses for the same. I have enclosed the details of Seminar and my Poster Copy for your ready reference.

Particulars	Amount
Transportation Expenses	1,740/-
Registration & Poster Presentation Charges	1,800/-
Accommodation Charges	6,400/-
Food Expenses	3,909/-
& Research, ELAGANT otal	k13,849/-
	Transportation Expenses Registration & Poster Presentation Charges Accommodation Charges Food Expenses

1 1 JUL 2012

Kindly do the needful.

0 6 AUG 2022

FINANCE SECTION

Yours Sincerely,

Thanking You,

Forwarded to The Registrat, KAHER

Dr. Nagonaj Han presented a PostER in

the said National anteresee. He has represented one collège.

. As per our KAHER norms this amound

may be remobursed to Dr. Naguraj.

Dr Nagaraja J Havalada Associate Professor,

Dept. of Organon of Medicine

KLE HMC, Belagavi

Asper nomine

KLE Homoeopathic Medical College & Hospital, BELAGAVI



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

A. To be filled by the faculty member:	
1. Name	DV. NAGARASA. HAVALADA.
2. Qualification	B. H.m.s. M.D (Horn)
3. Designation	Associate Professor.
4. Department	organion of medicine.
5. Email ID	naguherrala @ gmail. Com.
6. Institution	KLE Homocopathic medical coll
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	01-06-2019
3. Objectives of the Conference / Seminar / Symposium	Emergeny mediane, audiology. Continoma & Life style Disone
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper (Poster)
	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	e) Others, if any, specify.
Particulars of the Conference being attended	The state of the s
a) Title of the Conference / Seminar / Symposium	NEXUS-2022 National Seni
b) Date of conduct	NEXUS-2022 National Semi 24th 4 25th June-2022
c) Level of Conference	State / National
d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State Level : Rs. 8,000/- National Level : Rs.16,000/-
e) Venue	MUR AUditozium, MNR AHER Compl
f) Copy of the sanction letter along-with Brochure to be enclosed	Hyderabed, Telangar
lote: The faculty member is eligible for financial support to attend one Sta	ate / Zonal and one National Conference in a calendar year
2. Particulars of the financial support previously extended by the University	NO ANY
a) Name of the Organizer	
b) Title of the program	Y
c) Place	
d) Duration	
e) Date of Conference	
	A CONTRACTOR OF THE CONTRACTOR



(Formerly known as KLE University).

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

		Appendix on a property and the property of the
3. Tra	veiling (by shortest route) and other expenses involved	
		Particulars
a)	Place	Hydarabad,
b)	Mode of journey	Train
c)	Fare	No. of Accessing Springers (1981)
d)	To and Fro	724->740/-
e)	Accommodation charges	6400-00
f)	Registration / Delegation Fee	1500-00: +300-00
g)	Air-port Tax	
4. Do	cuments to be submitted:	ommunication control control protein protein the standard control of the control
a)	Copy of the letter of invitation from the organizers.	
b)	Copy of the full text of documents / abstract / pape prepared by the applicant for presentation.	Postes Presentation

DECLARATION

I hereby declare that:

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Signature of the faculty member Ref. No. The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the Heb

Department of Organon of Medicine KLE University's H.M.C. & Hospital

Beta avi.

Yours faithfully,

Principal PRINCIPAL

LE Homoeopathic Medical College & Hospital, **BELAGAVI**



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 05122214

03rd December, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE Homeopathic Medical College and Hospital, Belagavi.

With reference to the above, the request of **Dr.Supriya Kulkarni**, Associate Professor, Department of Homeopathic Materia Medica, KLE Homeopathic Medical College, Belagavi. For attending 'NCHPE-2022 13th National Conference on Health Professions Education and also Contributing Scientific Paper presentation to be held at Swami Himalayan University at Dehradun from 2nd to 3rd November, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deciment to be the University

* SELAGNY*

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

- 1. The PA to Hon. Chancellor, KAHER, Belagavi.
- 2. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 3. The Principal, KLE Homeopathic Medical College, Belagavi.
- 4. The Finance Officer, KAHER, Belagavi.

KLE UNIVERSITY'S HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

(Recognised by Central Council of Homoeopathy, New Delhi, M/O AYUSH. Gol) A Constituent Unit of



KLE ACADEMY OF HIGHER EDUCATION & RESEARCH



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A+ Grade by NAAC (3RD Cycle)

Placed in Category 'A' by MoE (Gol)

Yellur Road, Belagavi-590005, Karnataka, India.

Ph: 0831-2413863, (Extr.: 1262/1263) E-mail- kleuhmc@gmail.com E-mail: prinhomeo@kledeemeduniversity.edu.in Web: http://www.klehomoeo.edu.in

Ref. No: KAHER/HMC/22-23/D- 2-65

Dt.01/12/2022

To, The Registrar KAHER. BELAGAVI.

> Sub: Reimbursement of expenses spent for attending and online Poster Presentation at Swami Rama Himalayan University for National Conference of Health Profession Education (NCHPE 2022) at Dehradun Reg.

Respected Sir,

With reference to the subject cited above, I Dr Supriya Kulkarni, Associate Professor, Dept. of Homoeopathic Materia Medica presented a scientific paper online at National Conference of Health Profession Education (NCHPE 2022) held on 2nd and 3rd November 2022 at Swami Rama Himalayan University, Deharadun.. I request you for reimbursement of expenses for the same. . I have enclosed the details of the conference and Copy of my poster presentation for your ready reference.

Sl. No.	Particulars	Amount
1	Registration Charges	5,000/-
	Total Amount	5,000/-
		The first the second of the se

Kindly do the needful.

Thanking You,

KLE Academy of Higher Education & Research, BELAGAVI

0 1 DEC 2022

forwarded to the Registran Inward No. 24

Yours Sincerely,

Sir, ohe hers registered and Presented 9 Supries J. Kerkarni E-Poster duces a national Confesence. Dept. of Homoeopathic Materia Medica She could not make it off Line of KLE HMC Rolossia. there was a sad incidence gesthe family.

- Registoahim Chenger 6' Rs - 5000/- on be may kindt be granted. __all relevant documents entresed for your approval and sanetion



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

MANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

A. To be filled by the faculty member:	
1. Name	Dr Superiya J. Kulkarni M.D (Homoeopentry)
2. Qualification	M.D (Homoeopertry)
3. Designation	Ussociate Professar
4. Department	Homoeopothie nothing medic
5. Email ID	Kulkaenijsupinga 30 @ gorcil
6. Institution	KLE Hornolepultie Medical Co
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	1/5/2022
8. Objectives of the Conference / Seminar / Symposium	To compare human cornect
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	 a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper Postures c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation)
	i de la companya de
a) Title of the Conference / Seminar / Symposium	NCHPE-2022, National Confes
b) Date of conduct	NCHPE-2022 National Confes
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference	State / National
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals	State / National State Level : Rs. 8.000/ National Level Rs.16,000/-
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals	State / National State Level : Rs. 8.000/ National Level Rs. 16,000/-
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	State / National State Level : Rs. 8.000/ National Level Rs.16,000/-
 a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to 	State / National State Level: Rs. 8.000/ National Level Rs. 16,000/ Himalayan Schlar ms SCHU Dehvadun
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed	State / National State Level : Rs. 8.000/- National Level Rs.16,000/- Hima layer SEHU Dehacelus
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S 12. Particulars of the financial support previously	State / National State Level : Rs. 8.000/- National Level Rs.16,000/- Hima layer SEHU Dehaclus 1 SEHU Dehaclus 1 Late / Zonal and one National Conference in a calendar feat
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S 12. Particulars of the financial support previously extended by the University	State / National State Level : Rs. 8.000/- National Level Rs.16,000/- Hima layer SEHU Dehacelus
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S 12. Particulars of the financial support previously extended by the University a) Name of the Organizer	State / National State Level : Rs. 8.000/- National Level Rs.16,000/- Hima layer SEHU Dehacelus
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program	State / National State Level: Rs. 8.000/ National Level Rs. 16,000/- Himalcuyan Dehicalus This SCHU Dehic
a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program c) Place	State / National State Level: Rs. 8.000/ National Level Rs. 16,000/- Himalcuyan Dehicalus This SCHU Dehic



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[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

3. Travelling (by shortest route) and other expenses involved		Particulars	
a)	Place	Dehraelhie	o Uttarakhan
b)	Mode of journey		
c)	Fare		on one the
d)	To and Fro		9
e)	Accommodation charges		
f)	Registration / Delegation Fee	5000	
g)	Air-port Tax	2	
. Do	cuments to be submitted:		
a)	Copy of the letter of invitation from the organizers.		Peresentables.
b)	Copy of the full text of documents / abstract / pape prepared by the applicant for presentation.	nervelleur spinninger der eine für spinning i ansammelier	
	DECLARA	TION	
1	hereby declare that :		
	I have furnished the information in this application which	h is true to the best of m	ny knowledge and belief.
	• I am not getting any financial assistance / support fro	om the sponsorers / org	anizers of the Conference or any

- action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant. • I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Signature of the faculty member Supul 31/10/22 Ref. No.

The Registrar, KAHER, Belagavi.

Dear Sir,

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

HOD

Department of Materia Medica KLE University's H.M.C. & Hospital Belagavi.

Yours faithfully,

PRRIBATIPAL

KLE Homoeopathic Medical College & Hospital. BELAGAVI



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category

National Placed in Category

National Placed in Category

Placed in Category

National Placed in

Placed in Category 'A' by MoE (GoI)

INMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India
3: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D-

05122212

03rd December, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

KLE Homeopathic Medical College and Hospital, Belagavi.

With reference to the above, the request of Dr.Rinku Porwal, Associate Professor, Department of Forensic Medicine and Toxicology, KLE Homeopathic Medical College, Belagavi. For attending 'NCHPE-2022 13th National Conference on Health Professions Education and also Contributing Poster Presentation to be held at Swami Himalayan University at Dehradun from 2nd to 3rd November, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

- 1. The PA to Hon. Chancellor, KAHER, Belagavi.
- 2. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 3. The Principal, KLE Homeopathic Medical College, Belagavi.
- 4. The Finance Officer, KAHER, Belagavi.

KLE UNIVERSITY'S HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL (Recognised by Central Council of Homoeopathy, New Delhi, M/O AYUSH. Gol) A Constituent Unit of



KLE ACADEMY OF HIGHER EDUCATION & RESEARCH

(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A+ Grade by NAAC (3RD Cycle) Placed in Category 'A' by MoE (Gol)

Yellur Road, Belagavi-590005, Karnataka, India.

Ph: 0831-2413863, (Extn: 1262/1263) E-mail- kleuhmc@gmail.com E-mail: prinhomeo@kledeemeduniversity.edu.in Web: http://www.klehomoeo.edu.in

Ref. No: KAHER/HMC/22-23/D- 2-66

Dt.01/12/2022

To, The Registrar KAHER. BELAGAVI.

> Sub: Reimbursement of expenses spent for attending and Poster Presentation at Swami Rama Himalayan University for National Conference of Health Profession Education (NCHPE 2022) at Dehradun Reg.

Respected Sir,

With reference to the subject cited above, I Dr Rinku Porwal, Associate Professor, Dept. of Forensic Medicine & Toxicology presented a scientific paper at National Conference of Health Profession Education (NCHPE 2022) held on 2nd and 3rd November 2022 at Swami Rama Himalayan University, Deharadun.. I request you for reimbursement of expenses for the same. . I have enclosed the details of the conference and Copy of my poster presentation for your ready reference.

Sl. No.	Particulars	Amount
1	Transportation Expenses	16,376/-
2	Registration Charges	7,000/-
3	Accommodation Charges	4,616/-
	Total	27,992/-

Kindly do the needful.

Forwarded to The Reg

Thanking You,

OFFICE OF THE REGISTRAR KLE Academy of Higher Education & Research, BELAGAVI

0 1 DEC 2022

Yours Sincerely,

As per KAHER norms for a Poster Preservant Associate Professor,

Dept. of Forensic Medicine & Toxicology

KLE HMC, Belagavi Fs permissable. The same may kindly (Rs-16000/-)
be approved. as she has evelosed all retevant documentarys evidances for a l'ester preservation & your sanctères and fuit les peruptions



Financial grant availed

f)

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal) A. To be filled by the faculty member: Dr Knoku House 1. Name 2. Qualification Associate Prodesso 3. Designation 4. Department romagporusal @ gmail com. 5. Email ID KLE Homocopathic Medical Confee 6. Institution 7. Date of joining the Institution (the faculty should 4 1 2021 complete minimum one year of service to avail this facility) Preserving Human Connect un era of Tell Adv. in Medicine 8. Objectives of the Conference / Seminar / Symposium Please enclose a separate sheet. 9. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium a) Delivering Key-note address / orations / 10. Assignment in the aforesald Conference / Seminar / plenary lectures Symposium b) Contributing a scientific paper (Poster Presentation c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify. 11. Particulars of the Conference being attended NCHPG-2022 Nothand Conference a) Title of the Conference / Seminar / Symposium 2 na 23rd Mar. 2022. b) Date of conduct State / National c) Level of Conference Rs. 8,000/ State Level d) Quantum of financial grant eligible (or actuals National Level: Rs.16,000/expenses, whichever is less) Himalayan institute of re e) Venue Copy of the sanction letter along-with Brochure to Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program c) Place d) Duration e) Date of Conference



(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act; 1956]

13. Travelling (by shortest route) and other expenses involved Particulars		Particulars
a)	Place	Debradhun Warakho
	Mode of journey	fright albus.
-110	Fare	8188 + 81881
d)	To and Fro	16376 -
e)	Accommodation charges	4616
f)	Registration / Delegation Fee	7000[-
g)	Air-port Tax	
4. Do	cuments to be submitted:	
a)	Copy of the letter of invitation from the organizers.	poster Presentention
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	

DECLARATION

I hereby declare that :

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

Date 2010 22	Signature of the faculty member
Ref. No	Date: 24/10/22
To The Registrar, KAHER, Belagavi.	
Dear Sir,	To short in the prescribed format for grant of

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Signature of the HoD

Yours faithfully,

Principal

PRINCIPAL KLE Homoeopathic Medical College & Hospital,

BELAGAVI



Using Cioes, Kangon Shillishi.

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / ZONAL / NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

A. To	be filled by the faculty member:	
1. Nam	ne	Dr. Neha Kulkarne.
2. Qua	alification	MBBS MD PGDHPE POCRFAIMER Fello
3. Des	ignation	Profess or
4. Dep	artment	Physiology
5. Insti	tution	Jahmmedical College, Hubballi con mansfer) dr neha · kle Eg mail· com JNF1C(2006) 4 J4MMM C(2020)
6. Ema	ail ID	dar neha · kle @g mail.com
7. Date	e of joining the Institution	JNM((2006) 4 JUMMM ((2020)
8. Obj∈	ectives of the Conference / Seminar / Symposium	NCHPE confirence
9. Bene Con	efits to be derived from participation in the aforesaid iference / Seminar / Symposium	Please enclose a separate sheet.
10. Ass Sym	signment in the aforesaid Conference / Seminar / nposium	a) Contributing a scientific paper (poster or oral) b) Delivering a guest lecture c) Others, if any, specify.
by (s)	rticulars of the financial support already extended the University to attend the similar Conference during the current calendar year 1 st January to st December)	XHAloobio mal-Confount.
a)	Title of the Conference / Seminar / Symposium	XIII National conference on health
b)	Date of conduct	2nd 3rd November 2022
c)	Level of Conference (State / Zonal / National)	National
d)	Venue	Himalayan Institute of Medical Scie swampayanturous ity Dehradyn
		THE WALL WILLIAM AND THE PARTY OF THE PARTY
e)	Financial support extended by the University	swamplayar our sers it y behrady o
e) f)	Financial support extended by the University Copy of the sanction letter to be enclosed	4ex
f) Note : suppor		
f) Note: support Confer 12. Pa	Copy of the sanction letter to be enclosed The faculty member is eligible for financial rt to attend one State / Zonal and one National	4ex 16000 pl
f) Note: suppor Confer 12. Pa Cor	Copy of the sanction letter to be enclosed The faculty member is eligible for financial ret to attend one State / Zonal and one National rence in a calendar year. rticulars of the organizers of the aforesaid	4ex 16000 pl
f) Note : suppor Confer 12. Pa Cor	Copy of the sanction letter to be enclosed The faculty member is eligible for financial rt to attend one State / Zonal and one National rence in a calendar year. rticulars of the organizers of the aforesaid one in a calendar / Symposium	16000/ pl
f) Note: support Confer Confer Con a)	Copy of the sanction letter to be enclosed The faculty member is eligible for financial rt to attend one State / Zonal and one National rence in a calendar year. rticulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer	Swannarajan University's Himalay Institute of Medical Sciences, Debra
f) Note: suppor Confer 12. Par Cor a) b)	Copy of the sanction letter to be enclosed The faculty member is eligible for financial rt to attend one State / Zonal and one National rence in a calendar year. rticulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer Title of the program	Swaningan unversity's Himalay Frishita of Medical Sciences, Dehra XIII NCHPE. 2022 Dehaadyn, Uttarakhan d
f) Note: suppor Confer 12. Par Cor a) b)	Copy of the sanction letter to be enclosed The faculty member is eligible for financial ret to attend one State / Zonal and one National rence in a calendar year. Inticulars of the organizers of the aforesaid inference / Seminar / Symposium Name of the Organizer Title of the program Place	Swammarajan University's Himalay Inshitute of Medical Sciences, Debrah XIII NCHPE. 2022



KAHER'S JAGADGURU GANGADHAR MAHASWAMIGALU MOORUSAVIRMATH MEDICAL COLLEGE

Kundagol Cross, Kotagondhunshi, Hubballi-580028.

(A Constituent unit of KLE Academy of Higher Education & Research (Deemed-to-be-University), Belagavi)

Website: https://klejgmmmc.edu.in/ Email: infojgmmmc@kledeemeduniversity.edu.in
20836-2228244

Ref No: JGMM/PRI/Conf/ 527/2022-23

Date: 18-01-2022

To, The Registrar, KAHER University JNMC Campus Neharu Nagar BELAGAVI-10



(Through Prof. Dr. V.D. Patil, Director, Hospitals Development & New Projects)

Sub: Request to sanction financial support amount reg...

Ref: Your Letter No: KAHER/22-23/D-02012303 Dated: 21-12-2022

Respected Sir,

With reference to the subject cited above, I am forwarding herewith the Bills and Vouchers and attendance certificates, Photographs in respect of 1) Dr Ranjana Ranade, Associate Professor, Department of Pathology, 2) Dr Prajna K S, Assistant Professor, Department of Pathology for sanction financial support amount for attending National Conference.

SI No	Name of the Faculty	Amount
01	Dr Ranjana Ranade, Associate Professor, Pathology.	18000=00
	APCON-2022 National Pathology Conference, Held at Bangalore	
02	Dr Prajna K S, Assistant Professor, Pathology APCON-2022 National Pathology Conference, Held at Bangalore	19300=00

Kindly sanction the financial support for the same and do the needful.

Thanking you,

ACPICE OF THE REGISTRAR
ALE Academy of Higher Education
& Research, BELAGAVI

2 0 JAN 2023
Inward No. 24



PRINCIPAL
KAHER'S JGMM Medical College
Gabbur Cross, Kotgondhunshi,
HUBBALLI-28.



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in

Ref.No.KAHER/22-23/D-02012303

21st December, 2022

ORDER

Sub: Approval of Grant of financial support for attending the National

Conference at Bengaluru from 2nd to 4th December 2022.

Ref: Your office letter Ref. No. JGMM/PRI/CONF/ 2022 23/429 dated 14th

December 2022.

With reference to the above, the following faculty members are hereby permitted to attend the National Conference [70th Annual Conference of IAOM, APCON 2022 Hybrid Conference] to be held at Ramaiah Medical College, Bengaluru from 2nd to 4th December 2022.:

SL.	Name	Designation	Department
No			
1	Dr. Ranjana Ranade	Associate Professor	Pathology
2	Dr. Prajna K S	Assistant Professor	Pathology

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

To,

The above staff member.

Deemed-to-be University BELAGAN*

Prof Dr.V.A.Kothiwale Registrar

CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KAHER's JGMM Medical College, Hubballi.
- 3. The Finance Officer, KAHER, Belagavi

KLE JGMM MEDICAL COLLEGE
HUBBALLI.
INWARD NO: 1264 DATE OF 01/23
N-SINGLY DDR
INWARD CLEEN PRINCIPAL



KAHER'S JAGADGURU GANGADHAR MAHASWAMIGALU MOORUSAVIRMATH MEDICAL COLLEGE

Kundagol Cross, Kotagondhunshi, Hubballi-580028.

(A Constituent unit of KLE Academy of Higher Education & Research (Deemed-to-be-University), Belagavi)

Website: https://klejgmmmc.edu.in/ Email: infojgmmmc@kledeemeduniversity.edu.in \$\mathre{\mathrea}\$0836-2228244

Ref No: JGMM/PRI/Conf/ 50g /2022-23

Date: 18-01-2022

To, The Registrar, KAHER University JNMC Campus Neharu Nagar BELAGAVI-10



(Through Prof. Dr. V.D. Patil, Director, Hospitals Development & New Projects)

Sub: Request to sanction financial support amount reg...

Ref: Your Letter No: KAHER/22-23/D-16122213 Dated: 10-12-2022

Respected Sir,

With reference to the subject cited above, I am forwarding herewith the Bills and Vouchers and attendance certificates, Photographs in respect of 1) Dr Manisha Chougale, Associate Professor, Department of Anatomy, 2) Dr Chaitra B R, Associate Professor, Department of Anatomy 3) Dr Drakshayini B Kokati, Associate Professor, Department of Anatomy and 4) Ms Supritya Novel Tony, Tutor, Department of Anatomy for sanction financial support amount for attending 69th NATCON Global Congress of Anatomist National Conference. From 09th to 11th December-2022 at GIMS, Gadag, Karnataka

SI No	Name of the Faculty	Amount
01	Dr Manisha Chougale,	4,056=00 LOF THE REGISTRAN
	Associate Professor , Anatomy	KLE Arademy of Higher Education 4 Research, BELAGAVI
02	Dr Chaitra B R	5,056=00
	Associate Professor Anatomy	2 0 JAN 2023
03	Dr Drakshayini Kokati	4,056=00 30
	Associate Professor Anatomy	The state of the s
04	Dr Supriya Novel Tony	4,056=00
	Tutor Anatomy	

Kindly sanction the financial support for the same and do the needful.

Thanking you,



Fo.

PRINCIPAL
KAHER'S JGMM Medical College
Gabbur Cross, Kotgondhunshi,
HUBBALLI-28.



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref.No.KAHER/22-23/D- 16122213

10th December, 2022

ORDER

Sub: Approval of Grant of financial support for attending the National

Conference at Gadag from 8th to 11th December 2022.

Ref: Your office letter Ref. No. JGMM/PRI/CONF/ 2022-23/410 dated 05th December 2022.

With reference to the above, the following faculty members are hereby permitted to attend the National Conference [Global Congress of Anatomists and 69th NATCON] to be held at Gadag from 8th to 11th December 2022:

SL. No	Name	Designation	Department
1	Dr. Manish Chougale	Associate Professor	Anatomy
2	Dr. Chaitra BR	Assistant Professor	Anatomy
3	Dr. Drakshayini B Kokati	Associate Professor	Anatomy
4	Ms. Supriya Novel Tony	Tour	Anatomy

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

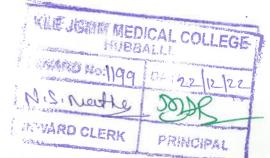
To,

The above staff member.

Deemed-to-be Control of Control o

Prof Dr.V.A.Kothiwale Registrar

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, KAHER's JGMM Medical College, Hubballi.
 - 3. The Finance Officer, KAHER, Belagavi





(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act. 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI) JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

*: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 03012301

31st December, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

JGMM Medical College, Hubballi.

With reference to the above, the request of Dr.Manisha Sachin Chougule, Associate Professor and In-charge HoD, Department of Anatomy, JGMM Medical College, Hubballi. For attending '69th NATCON National Conference of Anatomical Society of India'. And also presenting Paper entitled 'A cross sectional study on morphologic variations of corpuscallosum, its embryological correlation in North Karnataka. to be held GIMS, Gadag from 9th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

> Deemed-to-be BELAGAN

To,

The above staff member.

. CC to:

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, JGMM Medical College, Hubballi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

To be filled by the faculty member:	DO MANISHA SACHIN CHOUGUL
Name	MBBS, CMD, CAnatomy)
, Qualification	MBBS, CMID, OTTO HOO
. Designation	Associate Prop & Ile HOD.
. Department	Anatomy.
. Email ID	drmanishasc 23@ gmail. com
i. Institution	Jamm Medical College, Hul
'. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	01/07/2022
3. Objectives of the Conference / Seminar / Symposium	Presentation Scientific Paper
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar /	a) Delivering Key-note address / orations / plenary lectures
Symposium	b) Contributing a scientific paper
and the second of the second o	c) International collaboration exchange program (only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on
	invitation)
	e) Others, if any, specify.
	and the control of th
11. Particulars of the Conference <u>being attended</u>	e) Others, if any, specify.
Particulars of the Conference being attended a) Title of the Conference / Seminar / Symposium	and the control of th
11. Particulars of the Conference being attended a) Title of the Conference / Seminar / Symposium b) Date of conduct	e) Others, if any, specify. 69th NATCON 9th _ 11th Dec 2022
11. Particulars of the Conference being attended a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference	e) Others, if any, specify. 69th NATCON 9th 11th Dec 2022 State / National
11. Particulars of the Conference being attended a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals	e) Others, if any, specify. 69th NATCON 9th _ 11th Dec 2022 State / National State Level : Rs. 8,000/- National Level : Rs. 16,000/-
a) Title of the Conference being attended a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less)	e) Others, if any, specify. 69th NATCON 9th - 11th Dec 2022 State / National State Level : Rs. 8,000/-
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a) Title of the Conference being attended a) Title of the Conference / Seminar / Symposium b) Date of conduct c) Level of Conference d) Quantum of financial grant eligible (or actuals expenses, whichever is less) e) Venue f) Copy of the sanction letter along-with Brochure to be enclosed Note: The faculty member is eligible for financial support to attend one S	e) Others, if any, specify. 69th NATCON 9th - 11th Dec 2022 State / National State Level : Rs. 8,000/- National Level : Rs.16,000/- GIMS , Gadag , KARNATAKA
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(Formerly known as KLE University)

[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

3. Trav	elling (by shortest route) and other expenses involved	Partic	ulars
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	Place	BY ROAD.	and the second s
b)	Mode of journey	D1 100	and the state of t
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	Registration / Delegation Fee	3,000/-	the state of the s
g)	Air-port Tax		and the second second second second second second
4. Do	cuments to be submitted:		A 13
	Copy of the letter of invitation from the organizers.	Certificate of Enclosed	Kresentanon
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Enclosed	P

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

	Signature of the faculty member
Date: 16/12/2022	Signature of the recently
	Date: 16/12/22
Ref. No.	
То	
The Registrar, KAHER, Belagavi.	
Dear Sir,	the different for grant Of
We are enclosing herewith the application financial support to attend the International Confi	n of the above Teacher in the prescribed format for grant of erence outside India for kind consideration.
Thanking you,	Yours faithfully,
	MEDICA

Signature of the Hopfiead The Department of Anatomy KAHER's JGMM Medical College Gabbur Cross, Kotgondhunshi, HUBBALLI-28.

ical College Gabbur Croes Syondhunshi HUBBALLI-28.



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

🛣: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 03012305

31st December, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

JGMM Medical College, Hubballi.

With reference to the above, the request of Dr.Chaitra B.R., Associate Professor, Department of Anatomy, JGMM Medical College, Hubballi. For attending '69th NATCON National Conference of Anatomical Society of India'. And also presenting Paper entitled 'A study on variations in the hilar structures of kidney and associated renal anomalies' to be held GIMS, Gadag from 8th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University

Prof. Dr. V.A. Kothiwale Registrar

To.

The above staff member.

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, JGMM Medical College, Hubballi.
- 3. The Finance Officer, KAHER, Belagavi.



KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University) [Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES (To be submitted to the University through the concerned HoD & Principal)

A. To be filled by the faculty member:		
1. Name	Dr. Chaitea. B.R	
2. Qualification	MBBS, MD (Anadony)	
3. Designation	Associate Professon. Anatomy. Archaitoaboragmail.com RAHEP'S IGMM medial Gold	
4. Department		
5. Email ID		
6. Institution		
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	22-01-2021	
8. Objectives of the Conference / Seminar / Symposium	Olal preuntion.	
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.	
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify.	
11. Particulars of the Conference being attended		
a) Title of the Conference / Seminar / Symposium	69th NATION ACT	
b) Date of conduct	8th - 11th Dec. 2022.	
c) Level of Conference	State / National	
 d) Quantum of financial grant eligible (or actuals expenses, whichever is less) 	State Level : Rs. 8,000/- National Level : Rs.16,000/-	
e) Venue	Gadag Kalnatake	
f) Copy of the sanction letter along-with Brochure to be enclosed	Company Market Market and Company of the Company of	
Note: The faculty member is eligible for financial support to attend one St	tale / Zonal and one National Conference in a calendar year	
12. Particulars of the financial support previously extended by the University	Not applicable	
a) Name of the Organizer		
b) Title of the program		
c) Place		
d) Duration		
e) Date of Conference		
f) Financial grant availed		



HUBBALLI-28.

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

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e) Acco	ommodation charges	- /
f) Regi	stration / Delegation Fee	4000/-
g) Air-p	ort Tax	
14. Docume	nts to be submitted:	
a) Copy	of the letter of invitation from the organizers.	factor to the second
	of the full text of documents / abstract / paper ared by the applicant for presentation.	Certificate for swentyce puper (osl) attached.
elementario anterio, aper e una appropriate cari anteriori	DECLARA	1. V.
I hereby	déclare that :	
		So America And Albert Michael and manufacture and control of the America Andrews (No. 1874).
	ve furnished the information in this application which not getting any financial assistance / support from	is true to the best of my knowledge and belief. If the sponsorers / organizers of the Conference or any
othe acti	r funding agency for attending the aforesaid Confer	ence. I am aware that I am liable for any disciplinary later stage that the information furnished in this
• I sha		dance / Participation Certificate within fifteen days to the
	all conduct a seminar for the benefit of the faculty viedge and experience gained from attending the afo	members of the Department / Institution to share the resaid Conference.
Date :	Sign	nature of the faculty member
Name of the Control o	en etgent til	Trades of the record months.
Ref. No.	A CONTRACTOR OF THE CONTRACTOR	Date: 12-12-2
То		
The Registrar	, KAHER, Belagavi.	
Dear Sir,		
	e enclosing herewith the application of the above ort to attend the International Conference outside	
Thanki	ng you,	
	S. MED	Yours faithfully,
×	allan	Dewatto
Signature of th		Principal DAI
Profess		KAHER's Cal College
)epartmen	or & riead \\\ It of Anatomy If Medical College	KAHER's Cross, Actgordhunshi



(Formerly known as KLE University)

(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A⁺ Grade by NAAC (3rd Cycle)

Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

2: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 03012303

31st December, 2022

ORDER

Sub : P

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

JGMM Medical College, Hubballi.

With reference to the above, the request of Dr.Drakshayini B. Kokati., Associate Professor, Department of Anatomy, JGMM Medical College, Hubballi. For attending '69th NATCON National Conference of Anatomical Society of India'. And also presenting Paper entitled 'stature estimation from gregments of femus in south Indian population' to be held GIMS, Gadag from 8th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.



Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, JGMM Medical College, Hubballi.
- 3. The Finance Officer, KAHER, Belagavi.



(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES
(To be submitted to the University through the concerned HoD & Principal)

. To be filled by the faculty member:	
. Name	De DRAKSHAYINI, B. KOKATI
, Qualification	MBBS MD
B. Designation	ASSOCIATE PROFESSOR
I. Department	ANATOMY
5. Email ID	drdaksha. kokati 222@gmail. wom
3. Institution	KAHER'S JAMM Medical College Kel
7. Date of joining the Institution (the faculty should complete minimum one year of service to avail this facility)	17.12.2021
3. Objectives of the Conference / Seminar / Symposium	Oral Presentation @ Conference
Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium	Please enclose a separate sheet.
10. Assignment in the aforesaid Conference / Seminar / Symposium	a) Delivering Key-note address / orations / plenary lectures
	b) Contributing a scientific paper c) International collaboration exchange program
· Section of the sect	(only on invitation)
	d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on
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11. Particulars of the Conference <u>being attended</u>	e) Others, if any, specify. NATION 69th National Conference & A 8th Dec - 11th Dec 2022
Particulars of the Conference <u>being attended</u> a) Title of the Conference / Seminar / Symposium	e) Others, if any, specify. NATION 69th National Conference of A 8th Dec - 11th Dec 2022 State / National
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KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH (Formerly known as KLE University)

EMPOWERING PROFESSIONALS	[Deemed-to-be-University establi	shed u/s 3 of the LICC Act	10503
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	by of the letter of invitation from the organizers.	Certificate of pre	esentation
b) Cop prej	by of the full text of documents / abstract / paper pared by the applicant for presentation.	enclosed.	
• I a oth act	ave furnished the information in this application which is m not getting any financial assistance / support from her funding agency for attending the aforesaid Confere tion by the University in case it is found at a polication is wrong / false, in support of my application	the sponsorers / organizers nce. I am aware that I am lia ater stage that the inform on for financial grant.	of the Conference or any able for any disciplinary ation furnished in this
· · · · ·	nall produce necessary bills / receipts along-with Attend versity from the date of attending the aforesaid Confere	ence.	
• I sł kno	nall conduct a seminar for the benefit of the faculty is wledge and experience gained from attending the afore	members of the Department esaid Conference.	/ Institution to share the
Date : <u>13</u> .	12. 2022 Sign	ature of the faculty membe	r pal
Ref. No.	Promotine is define an annual particular years of company	Da	te: 13.12.2021
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ne Registrai	r, KAHER, Belagavi.		
ear Sir,	•		· · · · · · · · · · · · · · · · · · ·
nanciai supp	e enclosing herewith the application of the above ort to attend the International Conference outside ing you,	Teacher in the prescribed India for kind consideratio	format for grant of
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partment	of Anatomy	N PK	NCIPAL

KAHER's JGMM Medical College Gabbur Cross, Kotgondhunshi, HUBBALLI-28.

KAHER's JOYAR Medical College Gabbur Cross, Rotgondhunshi HUBBALLI-28.



(Deemed-to-be-University established u/s 3 of the UGC Act, 1956)

Accredited A^+ Grade by NAAC (3^{rd} Cycle) Placed in Category 'A' by MoE (GoI)

JNMC Campus, Nehru Nagar, Belagavi-590 010, Karnataka State, India

😰: 0831-2444444 FAX: 0831-2493777 Web: http://www.kledeemeduniversity.edu.in E-mail: info@kledeemeduniversity.edu.in

Ref. No. KAHER-/2022-23/D- 03012302

31st December, 2022

ORDER

Sub

Permission to participate in the National Conference.

Ref

Request letter of the applicant forwarded through the concerned HoD,

JGMM Medical College, Hubballi.

With reference to the above, the request of Ms.Supriya Noveltony A.H., Tutor, Department of Anatomy, JGMM Medical College, Hubballi. For attending '69th NATCON National Conference of Anatomical Society of India'. And also presenting Paper entitled 'Variations in the branching pattern of popliteal artery in the North Karnataka regional A cadaveric study'to be held GIMS, Gadag from 8th to 11th December, 2022, has been approved by the competent authority of the University.

The KAHER shall consider the release of financial grant only after submission of the attendance certificate, Photograph and original bills/ vouchers as per university rules.

Deemed-to-be University

* BELAGAN*

Prof. Dr. V.A. Kothiwale Registrar

To,

The above staff member.

- 1. The Special Officer to Hon. Vice-Chancellor, KAHER, Belagavi.
- 2. The Principal, JGMM Medical College, Hubballi.
- 3. The Finance Officer, KAHER, Belagavi.



c) Placed) Duration

Date of Conference
Financial grant availed

KLE ACADEMY OF HIGHER EDUCATION AND RESEARCH

(Formerly known as KLE University)
[Deemed-to-be-University established u/s 3 of the UGC Act, 1956]

APPLICATION FOR FINANCIAL SUPPORT TO ATTEND STATE / NATIONAL CONFERENCES

(To be submitted to the University through the concerned HoD & Principal) A. To be filled by the faculty member: Me Superya Novel Tony Msc Med Androny 1. Name 2. Qualification 3. Designation Anatony 4. Department supriyaprem kumozzi @gmeul 5. Email ID (AHER'S Jamm Medical college teuble 6. Institution 7. Date of joining the Institution (the faculty should 21-01-2021 complete minimum one year of service to avail this facility) and Dresentation (a) conf 8. Objectives of the Conference / Seminar / Symposium Please enclose a separate sheet. 9. Benefits to be derived from participation in the aforesaid Conference / Seminar / Symposium a) Delivering Key-note address / orations / 10. Assignment in the aforesaid Conference / Seminar / plenary lectures Symposium √b) Contributing a scientific paper c) International collaboration exchange program (only on invitation) d) Panel discussion or to deliver talks / lectures or invited to discuss arts / skills (only on invitation) e) Others, if any, specify. 11. Particulars of the Conference being attended NAT CON 6 9th National Confunce of F a) Title of the Conference / Seminar / Symposium 8th Dec to 11th Dec 2022 b) Date of conduct State / National \ c) Level of Conference State Level: Rs. 8,000/-Quantum of financial grant eligible (or actuals expenses, whichever is less) National Level: Rs.16,000/-Venue GMI Gad Copy of the sanction letter along-with Brochure to Note: The faculty member is eligible for financial support to attend one State / Zonal and one National Conference in a calendar year 12. Particulars of the financial support previously extended by the University a) Name of the Organizer b) Title of the program



(Formerly known as KLE University)

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1		Particulars	
a)	Place	Gadag.	The Control of the Co
b)	Mode of journey	Gadag. By Cov.	- In a control of the
c)	Fare		V-s
d)	To and Fro	Marie II	a company
е)	Accommodation charges		The second secon
f)	Registration / Delegation Fee	RS 3000 -	
g)	Air-port Tax		
4. Do	cuments to be submitted:		
a)	Copy of the letter of invitation from the organizers.	Certifical of pri	sentation
b)	Copy of the full text of documents / abstract / paper prepared by the applicant for presentation.	Certifical of pro	

I hereby declare that

- I have furnished the information in this application which is true to the best of my knowledge and belief.
- I am not getting any financial assistance / support from the sponsorers / organizers of the Conference or any other funding agency for attending the aforesaid Conference. I am aware that I am liable for any disciplinary action by the University in case it is found at a later stage that the information furnished in this application is wrong / false, in support of my application for financial grant.
- I shall produce necessary bills / receipts along-with Attendance / Participation Certificate within fifteen days to the University from the date of attending the aforesaid Conference.
- I shall conduct a seminar for the benefit of the faculty members of the Department / Institution to share the knowledge and experience gained from attending the aforesaid Conference.

knowledge and experience gained from alter	iding the dioresaid Conference.
Date: 17-12-2022	Signature of the faculty member
Ref. No.	Date: 17-12-2009
То	
The Registrar, KAHER, Belagavi.	
Dear Sir,	
We are enclosing herewith the application	of the above Teacher in the prescribed format for grant of

We are enclosing herewith the application of the above Teacher in the prescribed format for grant of financial support to attend the International Conference outside India for kind consideration.

Thanking you,

Yours faithfully,

Signature of the Hop Head Department of Anatomy KAHER's JGMM Medical College Gabbur Cross, Kotgondhunshi, HUBBALLI-28.

PRINCIPAL

KAHER's John Medical College Gabbur Cross, Notgondhunski (HUBBALLI-28.