

CEFTER OFF CAMPUS BENCH FEES UTILIZATION FORM

(This form is to be used only when there are no equipment or setups within BSU and partner institutions to carry out the research. There is no guarantee that every submission must be approved)

Section 1: Details of Applicant

PhD Msc (Tick)

Name:

Programme:.....

Course:.....

Course Start Date:.....

Email:..... Telephone No:.....

Name of Supervisors:

1.....

2.....

Section 2: Details of Project

2.1 Project Topic:

2.2. Project Summary (Not more than 300 words)

2.3 Topic of experiment to be carried out

2.4 Laboratory Identified for the Experiment

Name of the Institution:

Contact Person:

Phone:

Email:

Duration of experiment:

Proposed Date for commencement of experiment:

SECTION 3: Cost implication of the experiment

Travel:	
Accommodation:	
Courier Service:	
Charges at host Institution	

Attach Bill/Invoice signed by the Institution

Institution Account:

Cheque in the name of :.....

Recommendation of the Major Supervisor:

Recommendation of HOD:

.....
.....
.....

.....
(signature with stamp & Date)

OFFICIAL USE

SECTION 4: Approval

Comment by DDR&C

Decision by the Centre Leader