**APPLICATION FOR ATTENDING SCIENTIFIC MEETING/PUBLICATION FEE**

**UVA WELLASSA UNIVERSITY OF SRI LANKA**

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| --- | --- | --- |
| **1** | **Name** |  |
| **2** | **Department and Faculty** |  |
| **3** | **Contact Details** (Email and phone number) |  |
| **4** | **Application Category**1. Attending for a Scientific Meeting2. Publishing in a Refereed Journal(If the category is ‘1’ answers should be provided from 5 to 16. Otherwise, go to no 17 directly) |  |
| **5** | **Title of Scientific Meeting, Organizing Body and Address** (with the name of Country) |  |
| **6** | **Type of Presentation** 1. Oral 2. Poster |  |
| **7** | **Likelihood of Publication**Have the organisers of the Scientific Meeting offered to publish the paper after the event? If so, provide details. |  |
| **8** | **Dates of Scientific Meeting**(commencement and end) |  |
| **9** | **Travel Cost** (provide details) |  |
| **10** | **Subsistence** (provide details) |  |
| **11** | **Registration Fee** |  |
| **12** | **Other Costs** (provide details) |  |
| **13** | **Total Cost of Attendance (A)** |  |
| **14** | **Have you applied for and/or secured funds from other sources (B)** (e.g. NRC, UGC, Organisers of the Scientific Meeting etc.)? If so, provide details. |  |
| **15** | **Amount of money expected from the University (Max. LKR 100,000.00)** |  |
| **16** | **Have you previously received a fund from the University for publication/conference attendance?** If so, please specify the type, date and amount. |  |
| **17** | **Name of the Journal** |  |
| **18** | **Whether Indexed Refereed/Non-Indexed Refereed/Not Refereed** |  |
| **19** | **Date of Submission** |  |
| **20** | **Amount of money expected from the University (Max. LKR 100,000.00)** |  |
| **Recommendation by Head** | Recommended/Not recommended. |
| Signature: Date: |
| **Recommendation by Dean** | Recommended/Not recommended. |
| Signature: Date: |
| **Recommendation by Chairman/Research Committee****Uva Wellassa University of Sri Lanka** | Recommended/Not recommended. |
| Signature: Date: |
| **Approval by Vice Chancellor****Uva Wellassa University of Sri Lanka** | Approved/Not approved. |
| Signature: Date: |