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| NABS_logo-LATEST.jpg | **Proposal to organize**  **Prof. SK Memorial NABS-Lecture Workshop**  **[Application]** |

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| 1. | Name of the Institution with full address with E-mail ID of the institution) | **:** |  |
| 1.a. | Name of the University to which the Institution is affiliated | **:** |  |
| 1.b. | Name of the Principal / Dean of the College with mobile number/E-mail ID | **:** |  |
| 2. | Name of the Department willing to organize the Lecture Workshop | **:** |  |
| 3. | Proposed topic of the Lecture Workshop(Subject to approval by NABS) |  |  |
| 4. | Name and full address of the convener with mobile number & E-mail ID. | **:** |  |
| 5. | Is the proposed convener is a Member or Fellow of NABS? | **:** |  |
| 6. | Expertise available in the Department [List names and field of specialization] | **:** |  |
| 7. | Participating Institutions  (including the host institution)  List the institution(s) | **:** |  |
| 8. | Proposed number of students/teachers  (Not exceeding 100 in all) | **:** |  |
| 9. | Any resource persons you would like to suggest?  (subject to approval by NABS) | **:** |  |
| 10. | Proposed Chief Guest for Inaugural and Valedictory function | **:** |  |
| 11. | Budget estimate  (Provide in a separate sheet along with the application) | **:** |  |
| 12. | Signature of the Convener with date | **:** |  |
|  | Countersigned by the HOD & Principal/Dean of the Institution  (affix official seal) | **:** |  |