Faculty Development Schemes (FDS) and related guidelines

FDS 1. Support for participating in Conference, Workshop, Seminar and Symposium (SPC)

The Institute encourages the participation of its faculty in National / International research & development events by providing financial support. These events include conferences, workshops, Seminars and Symposiums. However, it should be clearly understood that this support is not an offer by the Institute, and the faculty members should not assume any automatic claim. The request for financial assistance / support for attending the events shall be routed through HoD / Principal of the concerned departments, who will recommend the case with clear and specific comments for final approval of the Director of the Institute.

The support for the participation in the event shall be subject to the following eligibility norms:

- 1. The Institute reimburse the actual registration fee paid up to an upper limit of Rs 50,000.
- 2. Other expenses on account of travel, boarding and lodging will be reimbursed, on production of bills, up to the following limits:

Event Place	Amount in Rupees
NCR	4,000
India (outside NCR)	10,000
Outside India	50,000

- 3. Those faculty members who are wishing to avail the facility will have to apply in a prescribed Proforma 1-A at least 15 days prior to the date of registration in the event / submitting his research paper, with clear comments of the respective HoD/Principal for its quality. The same will be routed through the Head/Dean (Research & Development) to the Director of the Institute.
 - a. *In case of conference paper*: After the acceptance of the paper, the applicant has to submit the documents showing the clear proofs of the same and the tentative travel plan in a prescribed Proforma1-B along with the prior application of approval (1A).

- b. Workshop, Seminar and Symposium should be at Institutions of National Importance which shall be decided by Director upon receiving Proforma 1-A and approval thereof.
- c. *In case of Workshop, Seminar and Symposium*: The applicant has to submit the tentative travel plan in a prescribed Proforma 1-B along with the application form (1-A).
- d. The expenses shall be reimbursed to the faculty after his return from the event on submission of the claims ininstitutional TA/DA forms along with application form (1-A) and travel plan (1-B). The candidate shall be eligible for the claim amount as proposed in the travel plan or the upper limit permissible, whichever is minimum.
- 4. In case of a conference paper, the applicant should have the first authorship in the paper, and his affiliation should be clearly shown as ABES Institute of Technology, NE-3, Near Crossing Republik, Ghaziabad, Uttar Pradesh, INDIA / ABESIT College of Pharmacy, NE-3, Near Crossing Republik, Ghaziabad, Uttar Pradesh, INDIA. The claim shall be processed only after publication in Scopus Indexed Conference proceedings or Scopus Indexed Journals.
- 5. The support for the event within India shall only be given to faculty members, who have completed at least 3 months of service at the Institute. For conferences held outside India, the minimum eligibility period shall be one year. The Institute, at its discretion, may sponsor a faculty for conferences held outside India within the first year of service, but reimbursement of expenses will only be made after the completion of minimum eligibility period of one year.
- 6. In each academic year, a faculty member can get support for a maximum of two events within India (two within NCR or one within NCR and another outside NCR). In a block of 2 years, a faculty member can get support of one event outside India.
- 7. The criteria and modalities of the scheme will be amended as and when needed.

FDS PROFORMA 1-A

PARTICIPATIONUNDER SPC SCHEME

Name and Designation:						
Institute & Department:						
Employ ID:						
Phone:		Email:				
Area of Research:						
Nature of Event [#] : (tick as below)						
() Conference	() Workshop	() Seminar	()			
Symposium						
	[#] Attach details	s of the event with this	s application			
Place: (tick as below)						
() National	() International					
8. Complete Address of the Event:						
9. Title of the Event:						
10. Research Paper Title*: (In case of conference)						
	*Submit a copy	of the paper with this	s application			
11. Relevancy of Paper with Conference: (In case of conference)						
Relevancy of Event with your	r research area:					
13. Benefits for the Institution and Society:						
14. Tentative budget:						
olicant Signature:						
e:						
Recommendations of HoD/Principal with comments:						
	Institute &Department: Employ ID: Phone: Area of Research: Nature of Event [#] : (tick as below () Conference Symposium Place: (tick as below) () National Complete Address of the Eve Title of the Event: Research Paper Title*: (In cas Relevancy of Paper with Con Relevancy of Event with your Benefits for the Institution an Tentative budget: olicant Signature: e:	Institute &Department: Employ ID: Phone: Area of Research: Nature of Event [#] : (tick as below) () Conference () Workshop Symposium "Attach details Place: (tick as below) () National () International Complete Address of the Event: Title of the Event: Title of the Event: Research Paper Title*: (In case of conference) *Submit a copy Relevancy of Paper with Conference: (In case of confer Relevancy of Event with your research area: Benefits for the Institution and Society: Tentative budget:	Institute &Department: Employ ID: Phone: Email: Area of Research: Nature of Event [#] : (tick as below) () Conference () Workshop () Seminar Symposium			

Signature:

Recommendations of Head/Dean (R&D) with clear comments:

Signature:

Date:

Director:

(Approved / or otherwise)

Signature:

Date:

Chairman:

(Seen)

Signature:

FDS PROFORMA 1-B

TRAVEL PLANUNDER SPC SCHEME

1.	Name and Designation:			
2.	Institute &Department:			
3.	Employ ID:			
4.	Phone:	Email:		
5.	Duration of Stay:			
	Going Date:	Retuning Date:		
6.	Previous Travel with dates (If any):			
7.	Travel (Up/Dowm):			
	From:	То:		
	From:	То:		
8.	Mode of Travel:			
9. Stay at (Complete Address):				
10. Details of financial assistance from any other source (if any):				

11. Details of expenditure:

Head of Expenditure	Amount in Rs	Assistance Requested
Travel		
Stay		
Per Day Allowance		
Registration Fees		
Contingencies (if any)		
Gross Amount		

Applicant Signature:

Recommendations of HoD/Principal with comments:

Signature:

Date:

Recommendations of Head/Dean (R&D) with clear comments:

Signature:

Date:

Director:

(Approved / or otherwise)

Signature:

Date:

Chairman:

(Seen)

Signature: