|  |
| --- |
| Application for Financial Support to Attend Conferences/ for Publications |



Please complete this form and email/submit to Research Centre (email: research@mnu.edu.mv)

## Personal Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | |  | | |  |
|  | Last | | First | | |  |
| Faculty: |  | | | | |  |
|  |  | | | | |  |
| Position: |  | | | |  |  |
|  |  | | | |  |  |
| Contact Number |  | Email address: | |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Number: |  |  |  |

## Type of Assistance Required (tick accordingly)

|  |  |  |  |
| --- | --- | --- | --- |
| Attending a conference: |  |  | Publication: |

## Conference Details

|  |  |
| --- | --- |
| Title of Paper: |  |
| Title of Conference: |  |
| Country: |  |
| Conference Dates: |  |

## Publication Details

|  |  |
| --- | --- |
| Title of Paper: |  |
| Title of Journal: |  |
| Publisher: |  |

## Budget Requirements

|  |  |  |  |
| --- | --- | --- | --- |
| Total Budget Requested: | MVR |  |  |
| (Please provide the budget breakdown in a separate sheet. Budget break down should include the budget required for travel, accommodation, food expenses, registration fee, publication fee, etc.) | | | | |  |  |

## Faculty/Centre Approval

**Statement by the Dean/ Head**

I have checked the title, abstract and the theme of the conference and verify that presenting at this conference is of value to the faculty and the university.

Yes □ No □

Hence, I hereby approve/disapprove this application.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name |  | Signature |  | Date |  |

The research should be **original research**. Things to be submitted with this form:

* Proof of acceptance for conference/publication
* Details of conference/publication
* Abstract (should include objectives, methodology, results and conclusion).
* PowerPoint Presentation of the research, to present at the committee meeting (not exceeding 5 minutes)
* Budget details as below

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the Applicant:** |  | | | |
| **Name of the Conference:** |  | | | |
| **Destination:** |  | | | |
| **Dates:** |  | | | |
|  | **Number of Days** | **Rate** | **Total (USD)** | **Total (MVR)** |
| **Airfare** |  |  |  |  |
| **Accommodation (Category 2)** |  |  |  |  |
| **Conference Days Dinner only** |  |  |  |  |
| **Food (Category 2)** |  |  |  |  |
| **Travel Allowance** |  |  |  |  |
| **Registration fee** |  |  |  |  |
| **TOTAL** |  |  |  |  |
| **Requested Amount** |  | | | |