**OVERSEAS TRAVEL GRANT (OTG)**

**FACULTY OF HUMANITIES AND SOCIAL SCIENCES**

**(Modified from OTG form University of Sri Jayewardenepura)**

**1. Information of the Applicant**

1.1. Full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.2. Date of birth: \_\_\_\_\_\_\_\_\_\_ Age (at the date of application): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.3. National Identity Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.4. Contact details:

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.5. Highest academic qualification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.6. Affiliation

Present title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of appointment to the present title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Information of the event**

2.1. Title of the conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.2. Location (Country and City): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.3. Duration: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.4. Nature of the presentation: (please tick relevant selection)

* 1. key note address/ invited speaker \_\_\_\_
	2. session chair \_\_\_\_
	3. oral presentation \_\_\_\_
	4. poster presentation \_\_\_\_

Please provide the evidence of invitation letters/proof of submission

* 1. Title of the presentation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. Name of the principal investigator:
	2. Contribution of the applicant to the research paper (in articles with more than one author):
	3. Information OTGs obtained from the university:

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Date of travel** | **Amount** | **Final report submitted:** **Yes/ No** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Tentative Budget**
	1. Cost of participation:

|  |  |
| --- | --- |
| **Description** |  LKR |
| Registration fee\*:  |  |
| Air fare\*: |  |
| Accommodation/Subsistence\*:  |  |
| Other (Please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |  |
|  |
|  |
| **Total** |  |

\*- Please provide evidences

* 1. Financial support requested from FHSS: Registration fee/ air fare/ visa fees/ accommodation/other (please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_):

LKR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. In the event of co-authored articles, the other author/s consent for publication and attendance:

**Name Signature**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Declaration**

I certify that the information and data furnished by me in this overseas travel grant application are true and accurate to the best of my knowledge. I am aware that in any case, the above information is inaccurate, the grant application will be rejected.

Date: - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Observations and recommendations of members of subcommittee for Research and Academic Development- Faculty Development Fund**

 Name Approved Signature

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**Observations and recommendation of the Dean of the Faculty of Humanities and Social Sciences**

Signature of Dean: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:- \_\_\_\_\_\_\_\_\_\_\_\_

**Observations and recommendation of Assistant Bursa, Faculty of Humanities and Social Sciences**

Signature of Assistant Bursa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:- \_\_\_\_\_\_\_\_\_\_\_\_

**Approval of the Finance Committee**

Signature Finance Committee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:- \_\_\_\_\_\_\_\_\_\_\_\_