APPLICATION FOR FOREIGN TRAVEL GRANT RESEARCH COUNCIL OF THE UNIVERSITY OF KELANIYA

1. Name of the staff member:

2. Position:

3. Are you a permanent staff member?

☐ Yes ☐ No

4. Department:

5. Faculty:

6. Unit (if not attached to a Faculty/) Department:

7. Email (Should be "…@kln.ac.lk"):

8. ORCID:

9. Google Scholar Profile Link:

10. ResearchGate Profile Link:

11. Web links to Linkedin Profile of the applicant:

12. Contact Number (Office):

13. Contact Number (Mobile):

5. Title of meeting/conference to be attended:

6. Venue and dates of meeting:

7. Title of paper to be presented at meeting: (Please attach the letter of acceptance)

8. Estimated expenses: (Please attach relevant documents as proof for estimated cost)

8.1	Airfare	LKR	US$
8.2	Registration fees	LKR	US$
8.3	Local travel and subsistence	LKR	US$
8.4	Visa Fee	LKR	US$

9. Total amount requested: LKR US$

1 US$ = LKR as on (date)

10. Have you previously received a travel grant from the University of Kelaniya? Yes/No If yes, give the following details

Source of Funding:

Date of the award: Amount awarded: LKR

20. Have you submitted your foreign visit report previously?

☐ Yes ☐ No

If Yes,
Please annex a copy of the report of the previous Foreign Travel grant date stamped by the Research Council :

I declare that the above information is true and correct. I also declare that the same paper has not been submitted to and/or presented at any other national or international symposium/workshop. I am aware that in case it is found that I breached this condition, I have to refund to the university the full travel grant awarded and will not qualify for future travel grants awarded by the University. I agree to submit the PDF version of the Abstract and the full paper to be deposited in e-repository/intranet of the University and publish the same in my ResearchGate profile.

Signature of the applicant: ……..... Date:

Recommended of the Director/Faculty Research Centre:

Signature of the Director/FRC:……. Date:

Recommended of the Head of the Department:

Signature of the Head:…….. Date:

Recommended of the Dean of the Faculty:

Signature of the Dean:…….. Date:

For office use only

Recommended of the Chairman Research Council:

Signature of the Chairman Research Council:……. Date: