**CALL FOR FINANCIAL SUPPORT FOR RESEARCH, INNOVATION AND COMMERCIALIZATION ACTIVITIES**

1. **Name, Designation, Department and Faculty of the Focal Person:**
2. **Other Team Members/Partners:**
3. **Type of Activity**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Activity** | **Yes/No** | **Type of Activity** | **Yes/No** |
| Workshop |  | \*Seminar |  |
| Training |  | Project Exhibition |  |
| Project Display |  | \*Thesis Display |  |
| Prototype Display |  | Policy Advocacy Study |  |
| Civic Engagement Activity |  | Other ------------------------ |  |

**Multiple selections encouraged. \*Must be accompanied with other listed activities.**

1. **Tentative week and month of activity: …………………………………………………………………**
2. **Information about attendees**

|  |  |
| --- | --- |
| **Approximate number**  | **Attendees type** |
|  | Students Faculty IUB staff Other -------------- |

1. **Names of relevant industry personal who will be attending the event (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. No.** | **Name** | **Designation** | **Industry** |
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1. **Names of relevant government officials who will be attending the event (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. No.** | **Name** | **Designation** | **Govt department** |
|  |  |  |  |
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1. **Names of civil society individuals who will be attending the event (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. No.** | **Name** | **Role** | **Domain/Sector** |
|  |  |  |  |
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**Note:**

1. Department or Faculty level activities are encouraged. However, an individual faculty member with his/her team can also apply.
2. All applications along with a cover letter should preferably be sent through proper channel.
3. Activities must be conducted in the month of April and May 2025.
4. One of the segments from item 6, 7 and 8 are compulsory.
5. ORIC IUB will provide certificate of participation, shields and working refreshment to guests.