**Project Monitoring and Evaluation Cell**

**भाकृअनुप–राष्ट्रीय पशुरोग जानपदिक एवं सूचना विज्ञान संस्थान**

 **ICAR–National Institute of Veterinary Epidemiology and Disease Informatics**

**(ISO 9001: 2015 Certified)**

**Proforma I-R**

**Proforma to be submitted to PME Cell by author (s) for forwarding abstract/ full paper for presentation to the national/international seminar/symposia/conference etc.**

Date:……………

**To**

The Director,

ICAR-NIVEDI,

Bengaluru-64.

**Subject:** Submission of abstract/full paper for presentation to the national/international seminar/

symposia/conference etc.

**Sir,**

I/we are/am enclosing herewith an abstract/full paper entitled “…………………………………………………………………………………………………………………………………………………………………………………………………………” with a request that the permission may kindly be granted for submission of the same in the “……………………………………………………………………………………………………” national/international seminar/symposia/conference/others (to specify).

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| --- | --- | --- |
| **S.No.** | **Item** | **Particulars** |
|  | The article/paper/manuscript is based on bona fide research and/or miscellaneousobservations conducted in the Institute and is related to mandated activities as perdetails below. |  |
|  | Project title:Project Ref. No. (PME code):Type of project: Institute project/ Externally funded/ Contract research/ MVSc/ MSc/ PhD research/ any other scheme. |  |
|  | Title/Topic/Name of the activity of the institute of which the publication is an output. |  |
|  | Date:Location:Venue:of the symposium/seminar/conference etc.to be organized |  |
|  | Deadline/last date of submission of abstract/full paper to the organizers |  |
|  | Name of the society/organization  |  |
|  | Cost of travel/boarding & lodging fee including registration fee borne byICAR/Institute/organizer/sponsor/self |  |
|  | Number of seminar/ symposium/ conference **attended** by the scientist during the current financial year and for each mention the source of fund.  | Total -Institute -External - |
|  | Number of seminar/ symposium/ conference **applied** by the scientist during the current financial year and for each mention the proposed source of fund. | Total -Institute -External - |
|  | Whether the abstract will be presented by the undersigned Corresponding Author?. If No. indicate the Name of the Presenting Author and his/her Designation | Yes / No |
|  | Whether care has been taken that the publication will not leave to premature discloser in case filing of patent is envisaged | Yes / No |
|  | Whether the issue of plagiarism has been taken care of  | Yes / No |
|  | Whether all the authors contributed in this work have been figured in the abstract in due sequence\* | Yes / No |
|  | Whether all minimum requirements including format, introduction, body, conclusion, works cited page, conventions’ (grammar and spelling) etc. for submission of the manuscript have been taken care of | Yes / No |
|  | Required documents listed in the checklist attached (Annexure I) | Yes / No |

*\* The responsibility in this regard lies with the corresponding author and PME Cell will not be responsible.*

*I. Dr/Mr/Smt/Ms…………………………………, Certify that : (i) The data /results/schemes/ideas given in the abstract/paper is based entirely on the work of my /Our research work and need not necessarily represent the views of the institute/ICAR, and (ii) Due Credit of authorship has been given to each contributors of the abstract/paper*

Signature with name and designation of Corresponding Author

Signature of available Co-authors, if any

Recommended and forwarded by the PME Cell In-charge

(Signature of the PME Cell In-Charge)

Approval of the Head of the Institute / Director

(Signature of the Director of the Institute)

**Annexure-I R**

**Project Monitoring and Evaluation Cell**

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 **ICAR–National Institute of Veterinary Epidemiology and Disease Informatics**

**CHECKLIST**

The following documents/reference are required for forwarding/processing of the submitted abstract/ full paper for presentation to the national/international seminar/symposia/conference etc.\*

|  |  |  |
| --- | --- | --- |
|  **S. No** | **Documents/Reference** | * **Tick**
 |
|  | Duly signed and completed abstract submission proforma by the Corresponding Author |  |
|  | Duly signed and completed abstract by the author (s) with specified minimum requirements including format, for submission of the abstract/full paper and the authors contributed in this work have been figured in due sequence. |  |
|  | Brochure of the seminar/symposia/conference etc. with the highlight on the Date, Location, Venue, Deadline/last date of submission to the organizers, Name of the society/organization/Institute organizing the event. The abstract submission/processing fee/registration fee for the presenting author participation in the event either as member/ non-member/ invited/lead speaker. |  |

 *\* The incomplete application without the required checklist, will not be processed further at PME Cell of ICAR-NIVEDI.*

 **Signature of Corresponding Author**

**OFFICE USE (PME Cell) Only**

**Date of Receipt of application as per register in PME Cell……………..Provided Ref. No. ...................**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No.** | **Documents/Reference submitted by Author(s)** | **Verified by PME Cell**  | **Remarks/****Comments** | **Signature of the Verified officer**  |
|  |  |  |  |  |
|  |  |  |
|  |  |  |
|  | Number of seminar/ symposium/ conference attended by the Presenting/corresponding Author during the current financial year  | Total –Institute –External – |

Date of submission/put up of file to the CA /Director Cell:

Signature of Incharge

Date of receipt of file from the CA /Director Cell :……………………..

Date of clearance from PME Cell:……………… PME Cell Ref. No. with date:………………………..

Communication date: Soft copy through Email/ Hard copy:………… ……..

Signature of PME Cell Incharge