

ABV-Indian Institute of Information Technology & Management Gwalior
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Report on Conference /Symposium/Workshop participated by ABV_IITM Faculty

A. General

Name of Faculty	
Name of the conference/symposium/workshop	
Date	
Venue	

B. Support given by the institute

Item	Amount in Rs	Remarks (if any)
Travel		
Registration fee		
Miscellaneous (Like staying , local transport etc.)		
Total		

C. About the event

Aims of the conference/symposium/workshop	
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Total no of participants	
Sponsors of the event (if any)	
My contribution to the conference (elaborate on paper presented/chaired or just attended as special invitee)	
Interesting features of the event (if any)	
Learnings from the event	
How ABV-IITM can utilise the	

linkages developed in this event (you may give addresses of contact persons with whom we can network)

Date

To,

Director

Signature of faculty member