C-1685076

ALL INDIA INSTITUTE OF MEDICAL SCIENCES Ansari Nagar, New Delhi-29

No.F.20-14/2010-Estt. I

Dated:15.10.2024

OFFICE MEMORANDUM

Subject: Mechanism for granting permission to non-faculty employees (other than Scientists) to attend conferences, seminars, workshops and other academic activities in India and abroad on duty terms with /or without financial assistance from the Institute.

In continuation of this Memorandum No.F. 20-1/2010(CAO)-Estt.I dated 6.4.2015, to establish a standardized, objective, and transparent process for granting permission to non-faculty employees (other than Scientists) to attend conferences, seminars, workshops, and other academic activities in India and abroad on duty terms with or without financial assistance from the Institute, a Committee under the chairmanship of the Director, AIIMS, New Delhi, after extensive review of the existing mechanism, framed the mechanism on the subject as below:

- 1. Eligibility: Non-faculty employees will continue to be considered for participation in national/international academic events on a case-by-case basis, subject to the merit of their participation.
- 2. **Application Process:** Applicants will be required to submit information and documentation similar to that required for the faculty members and scientists. Additionally, the Head of the Department/Controlling Officer will provide specific details regarding the justification for participation, sources of funding for attending and other relevant information. The revised proforma to capture from AIIMS along with specific recommendations of HOD/Controlling Officer will be henceforth used for this purpose (Copy attached).
- 3. Financial Assistance: Financial assistance will be limited for various regions as below:
 - America (North & South): Rs. 3,00,000/-
 - Europe: Rs. 2,00,000/-
 - Rest of the world: Rs. 1,50,000/-

Financial assistance under various heads (eg. Travel, Hotel & Per diem), the employee's entitlement is subject to the cap, as this will be subject to the production of actual receipts/bills of expenditure & will be decided as per actual or, the cap, whichever is lower.

Further, participation of non-faculty employees (other than Scientists) will be allowed once in 3 years for International events & once in a year for events within India.

AIIMS is a premier institute of national importance & serving the academic and research needs of India's healthcare sector. Patient care is our priority thus it is imperative that clinical services are not compromised. Accordingly, the committee also decided that:

Permissions can be granted for conferences, CMEs, workshops, and seminars organized by various departments of AIIMS, New Delhi on their own or in collaboration with scientific associations and events outside, subject to specific recommendation of the HOD/Chief of Centre, as the case may be, for these events, employees need to apply and submit all required documents and obtain prior permission.

This revised mechanism aims to provide a fair, transparent, and efficient process for granting permission to non-faculty employees (other than Scientists) to attend conferences, seminars, workshops, and other academic activities. By adhering to these guidelines, the Institute can ensure that such activities contribute to its overall goals and objectives.

The above may be brought to the attention of all concerned.

This issues with the approval of the Director, AIIMS.

(Anita Tete)
SENIOR ADMINISTRATIVE OFFICER

Encl. As above

DISTRIBJUTION:

1. All Chief of Centres/Head of Departments/Units/Sections.

- 2. All Sr. Admn. Officer/Administrative Officer of Establishment Section (Hospital /CNC /Dr.RPC /CDER/JPNATC/Dr.BRA, IRCH/CRHS Ballabgarh/NCI, Jhajjar /NDDTC/MCH/NCA/Surgical Block/B&PS/ESD/Faculty Cell/Rectt. Cell/Estate Section/Legal Cell/Co-ordination Cell/SC-ST-OBC-Women Cell/Hindi Section/ Academic Section/Examination Section/Hostel Section/ Computer Facility/Research Section
- 3. The Computer Facility with a request to upload this on official website of the Institute
- 4. <u>The Sr. Hindi Officer</u> with a request to provide the Hindi version of the same for uploading on AIIMS website.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES ANSARI NAGAR, NEW DELHI-110029

Sem	ication form for seeking permission to attend Scieninar/Workshop/Short Term Training or Course or Inding Scientists)	Programme Abroad for Non-Faculty Staff
In c	Only completely filled forms will be considerate, any column is not applicable, please write "Not vacant	lered for further processing Applicable" but do not leave any column
1	Name of the Employee	
2	Designation	
2	Department	
	Current posting	
3	Date of Birth	
4	Date of appointment [Regular Employee]	
5	Nature of leave requested (Duty leave/EL/CL/any other)	
6	Name of the event	
7	Nature of the Event: a. Conference/Meeting/Symposium/CME/ Workshop b Training c Other (Specify)	
8	City & country where the proposed event is to be held	
9	Duration of proposed event with dates	

Whether the applicant is attending the entire period

of event. I, if not, indicate the actual period of

participation with dates.

10

11	Date of departure, FN/A Date of return, FN/AN	Date of joining, FN/AN	No of days of leave (includ Sundays/holidays)		
		v			
12	Nature of participation (attach evidence)	Presenting paperInvited SpeakerTrainee in a couOthers			
13	Name of the organizer of the event				
14	Status of organizer: a Government/International's Organization (WHO etc.)/University. b Professional society/association (Internation c Private organization d Others (Give the details)				
15	Name of the source/s of Funding to meet the expenditure for the proposed visit. Specify the component of financial support required from AIIMS, New Delhi/other than AIIMS.	In the case of funding from AIIMS/LRA, Ne components of funding & [Sources/AIIMS/LRA]			
	The Delity of the Thirt Thirty	Regn Fee	Rs.		
	a. Full Funding From AIIMS:	Air- Fair	Rs.		
	Yes/NO/Partial	Visa Fee	Rs.		
	(If funding is from AIIMS, specify	Hotel charges Per-diem	Rs.		
	components to be covered from the same).	Medi. Ins.	Rs.		
	b. LRA Full/Partial funding from LRA (specify components to be reimbursed from LRA	Total : Rs.	NS.		
16	Source of funding - Project Fund/Govt. Source	Details of funding from	Project/Other Govt Sources:		
	i Project Fund ii ICMR/DBT/DST iii Any other Govt. Source	180	emuneration Amt:		
17	If funding from any other sources, then above nature of sources: a. Foreign Government/International Organization (WHO etc.)	Details of Funding from	one of these sources:		
	b. Foreign professional society/association				
	c. Indian professional society/association				
	d. Private organization				
	e. Other: Specify				
	f. Self				
	g. Any Other (Specify)				

8	In case funding from AIIMS, furnish the	
	following information:	
	a) Oral or poster presentation	
	b) Acceptance letter from the organizers	
	c) Copy of the abstract of Scientific Paper, submitted to the organizers	
	d) Has the same work/abstract already been presented by any member of the research team in any national/international conference?	
	e) Brochure of the event	
	f) Consent and NOC from all co-authors for presentation of scientific paper	
	g) Research Project details under which the work was carried out.	
	h) Ethical clearance for the said project work (Please attach a copy of EC clearance)	
	i) Is the presenter's name was there in the research proposal submitted to the Ethics Committee?	
19	What is the likely benefit to the applicant and AIIMS from this participation?	
20	a. Name, dates and destination of the events attended abroad with financial support from AIIMS, New Delhi/LRA/Research Project in the current Financial Year.	
	b. Name date & destination of events attended with funding other than AIIMS/LRA /Research Project in the current FY.	
	c. Details of events attended with own Funds.d. Name, dates and destination of the events attended abroad in the last three years	
	e. Details of publications resulting from papers / data presented during previous visits financially supported by the Institute	
21	Whether departure, joining and participation reports submitted in respect of last academic event attended	
22	Name of the person from the department who will look after the duties during the applicant's absence from headquarters	

Certified that the information furnished above by me are true and correct to the best of my knowledge and nothing has been concealed. I also undertake that my participation in the aforementioned event is in accordance with the existing guidelines of the Institute and I will furnish the participation certificate as soon as I return from the same.

Date:	Signature of the applicant
Place	

FOR HEAD OF THE CONCERNED DEPARTMENT/CONTROLLING OFFICER USE ONLY.

A. In case more than one employee is attending the Conference etc., the following column may be filled up by the Head of the Department

. No. Names & Designations of the employees	Actual duration of participation
Trumes a Designment of the Land	

B. Checklist

1	Reason of participation is valid/justifiable	Yes		NO
2	Funding is from AIIMS, the registration fee for the event is justifiable based on nature of event.	NA	Yes	No
3	The event is organized by a recognized professional society/institution and in the area of specialization of the applicant.	NA	Yes	No
4	Though the event is organized by a private entity/industry, the reason for participation is justified and no hospitality is being taken from it.	NA	Yes	No
5	Funding is being provided by an Indian agency/society other than Indian government organizations, the applicant is unlikely to have an influence on approval of funding.	Company of the Compan	Yes	No

How the participation will help the Department and Institute (HOD/Controlling officer specific comments required):-
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Recommendation of the Head of the Department/Controlling Officer with Signature & Office stamp Recommendation of the Chief of the Center (if applicable) with Signature & Office stamp

ALL INDIA INSTITUTE OF MEDICAL SCIENCES ANSARI NAGAR, NEW DELHI-110029

APPLICATION FORM FOR SEEKING PERMISSION TO ATTEND SCIENTIFIC MEETING/CONFERENCE / SYMPOSIUM/SEMINAR/WORKSHOP/SHORT TERM TRAINING, EXTERNAL EXAMINER OR COURSE (DOMESTIC)

1	Name of the Faculty	Salar de Constante			
2	Designation & Department	R 1			
3	Date of Birth				#1 1
4	Date of appointment [as faculty member]				1.0
5	Name of the event			>	
6	Nature of the Event: a. Conference/Meeting/Sy Workshop b. Training c. Other - Specify	mposium/CME/	K		
7	City/ SAARC Country where t be held	he proposed even is to	15		
8	Duration of proposed event v	vith dates			
9	Whether the applicant is atte of event. If not, indicate the a participation with dates.		13		
10	Date of departure, FN/AN	Date of return, FN/AN	Date of jo	ining, FN/AN	No of days of leave
				E A	
11	Categories of participation [P relevant one]	lease encircle the	season/To workshop support fr a specified	deliver lecture as ir /invited to participate om AIIMS, New Delhi]/II	Chair/Co Chair/A scientific nyited Speaker or Faculty in the event [without financial nyited for availing of training in offered by Universities? [Please videoscal
12	Name of the organizer of the	event	specify an	a attach documentary ex	indence]
13	Name of the funding Agency for the proposed visit. Specify financial support required fro	the component of	•	nts of funding sought fro Regn. Fee Travel Expense Hotel Expense Per-diem	m AIIMS/LRA
14	In case funding from other the status of Funding Agency to rethe proposed visit. [Please encircles the relevant	neet the expenditure for	Associat	Govt./Govt. funded/ ion/Non-profit, non- of others, specify)	Scientific Govt. Organization/Other

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	In case funding from parent Institute, furnish the following:	3
	a) Acceptance letter of Scientific paper in PDF duty signed by the concerned authority of organizer	2
	b)Copy of Abstract of Scientific Paper	
15	c)Invitation letter to participate in the event (in case of without financial support from AIIMS, New Delhi) or Invitation letter to Chair/Co-Chair the Scientific session or to deliver Lecture as in invite Speaker/Faculty in workshop or invitation letter for availing of training in a specified course or programme offered by University	
	d)Brochure of the event	
2	e)Consent from all co-authors for presentation of scientific paper	
	f)Research Project under which the work was carried out.	
	g) Ethical clearance for the said project work	
16	Name, dates and destination of last even attended abroad with financial support from AIIMS, New Delhi	8
17	Whether departure, joining & participation reports submitted in r/o last academic event attended	
18	Name the Faculty who will look after the duties during the applicant's absence from Head quarters for the purpose	
19	What is the likely benefit to you and AIIMS from this participation?	
20	Any other relevant information	

Certified that the information furnished above by me are true and correct to the best of my knowledge and nothing has been concealed. I also undertake that my participation in the aforementioned event is in accordance with the existing guidelines of the Institute and I will furnish the participation certificate as soon as I return from the same.

Date:	Signature of the applicant.

FOR HEAD OF THE CONCERNED DEPARTMENT/CHIEF OF CENTRE'S USE ONLY.

A. In case more than one faulty members(s) is attending the Conference etc., the following column may be filled up by the Head of the Department

5. No.	Name & Designation of the Faculty member	Actual duration of participation
		id.

S. I	No. Name & Designation of the faculty member		Duration	
	e ::		&	
stre	ile forwarding the applications, the Head of the Deparength of faculty (in position) of the concerned Departning the duration of the Conference etc.			
2011-0-2010	2		×	
1	Reason of participation is valid/justifiable	Yes		NO
2	Funding is from AIIMS, the registration fee for the event is justifiable based on nature of event.	NA	Yes	No
3	The event is organized by a recognized professional society/institution and in the area of specialization of the applicant faculty.	NA	Yes	No
4	Though the event is organized by a private entity/industry, the reason for participation is justified and no hospitality is being taken from it.	NA	Yes	No
5	There is any pending work flagged by the Dean (Academic/Research/Exam) against the faculty.	Y	'ES	NO
6	Any other comment			101
	at are the benefits by participating in the event to:-			
i)	Individual			

Signature of the Head of the Department with Signature & Office stamp.

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