

**POSTGRADUATE INSTITUTE OF AGRICULTURE  
UNIVERSITY OF PERADENIYA**

**APPLICATION FORM**

**FOR**

**GRANTS UNDER THE POSTGRADUATE RESEARCH PUBLICATIONS FACILITATION FUND (RPFF)**

**1. NAME OF APPLICANT :** .....

i. Board of study:..... Date of Registration & No:.....

ii. Program of study: M.Sc, M,BA, M.Phil, Ph.D, DBA: .....

iii. Status: Full time

iv. Contact details:

Address:.....

Tel..... E mail:.....

**2. TITLE OF RESEARCH PROJECT:** .....

.....

**3. STATUS OF RESEARCH: On-going/Completed** (*Give date of completion*)

**4. NAME OF SENIOR SUPERVISOR:** .....

**5. TYPE OF FUNDS REQUESTED:**

i. To meet subscription charges: Yes/No: (*If Yes complete sections 6 and 8 only*)

ii. Attend conferences/workshops for oral /poster presentation : Yes/No (*If Yes complete Sections 7 and 8 only*)

**6. REQUESTS TO MEET SUBSCRIPTION CHARGES OF JOURNALS**

- i. Title of article: .....
- .....
- li Name/s of authors: .....
- .....
- iii. Name of the journal: .....
- iv. Publisher: ..... Country: .....
- v. Cited in SCI or SCI expanded: Yes/No
- vi. Recent impact factor: *(Attach copy of web page indicating impact factor)*
- vii. **TOTAL AMOUNT REQUESTED (Rs):** .....

**7. REQUESTS TO MEET CONFERENCE/WORKSHOP EXPENSES:**

- I. Name of Conference/Workshop.....
- .....
- II. Organizing institution:.....
- iii. Conference venue:.....
- iv. Duration *(Give dates and attach a copy of the invitation):* .....
- v. Title of the oral/poster presentation: *(attach a copy of the abstract with names of authors)*
- .....
- vii. **TOTAL AMOUNT REQUESTED** *(itemize details with supporting documents, where possible)*

**8. RECOMMENDATIONS**

**i. Senior Supervisor:**

Name & Designation:.....

Recommendation:.....

Signature..... Date:.....

**ii. Chairman/Secretary of Board of Study**

Name and Designation:.....

Recommendation:.....

Signature..... Date:.....

**9. DECLARATION BY THE APPLICANT**

I submit this application and affirm that the information provided herein is true and correct to the best of my knowledge.

Name of Applicant:.....

Signature: ..... Date:.....

**10. RECOMMENDATION OF THE COMMITTEE**

10.1 Given details are correct/incorrect

10.2 Application submitted through the Board of Study: Yes/No

10.3 Documents attached

Document type	Yes	No	N/A
Abstract			
Copy of the Journal web page			
Letter of acceptance			
03 Travel Quotations			
Submitted report for the last travel/publication grant			
Other ( <i>List below</i> )			
<b>Deputy Registrar/PGIA</b>	<b>Signature</b>		<b>Date</b>

<b>Recommendation :</b>		
	<b>Signature</b>	<b>Date</b>
<b>Committee Member 1</b> Name:		
<b>Committee Member 2</b> Name:		
<b>Committee Member 3</b> Name:		
<b>Approval:</b> Approved/Not Approved		
If not approved, Reasons :		
<b>Director</b>		