

**INDIAN INSTITUTE OF TEHCNOLOGY, KANPUR  
OFFICE OF THE FACULTY AFFAIRS**

**APPLICATION FOR PROCEEDING ON ASSIGNMENT  
DURING SUMMER/WINTER VACATION**

PF No.

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1. Name : .....

2. Designation : .....

3. Department : .....

4. Date of joining the Institute : 

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date      month      year

5. Purpose (tick the appropriate item(s))

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Consultancy           | <input type="checkbox"/> Research     |
| <input type="checkbox"/> Teaching              | <input type="checkbox"/> Book writing |
| <input type="checkbox"/> Others (specify)..... |                                       |

6. Nature of offer (enclose a copy of offer)

(a) Organization: : .....

(b) Designation: : .....

(c) Financial Support (tick the appropriate item(s)):

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Salary                | <input type="checkbox"/> Stipend    |
| <input type="checkbox"/> Honorarium            | <input type="checkbox"/> Fellowship |
| <input type="checkbox"/> Others (specify)..... |                                     |

7. Duration and the type of leave requested

Vacation/Leave	From	To	Number of days
Vacation			
Foreign Service			
Earned			
Extraordinary			
Other (specify)			

8. Mailing Address during leave:

.....  
.....

Tel. No.:.....Fax No.:.....Email:.....

9. Arrangements regarding academic and other responsibilities:

(a) Teaching: Are you teaching a summer course (Yes/No)?  
If Yes, indicate arrangements made:

(b) B.Tech. Project: Concurrence of faculty member(s) who will look after B.Tech. Project student(s) working with you:

(c) M.Tech. Project: Concurrence of faculty member(s) who will look after M.Tech. student(s) working with you:

(d) Ph.D. Thesis guidance: Concurrence of faculty member(s) who will look after Ph.D. student(s) working with your:

(e) Sponsored Research/Consultancy Projects\*: Concurrence of faculty member(s) who will look after sponsored/consultancy projects with you:

(f) Departmental/Institute Responsibilities: Indicate the arrangements made:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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**RECOMMENDATIONS OF THE HEAD OF DEPARTMENT**

- |                         |                                      |  |
|-------------------------|--------------------------------------|--|
| 1. Academic arrangement | <input type="checkbox"/> approved    | <input type="checkbox"/> not approved    |
| 2. Leave                | <input type="checkbox"/> recommended | <input type="checkbox"/> not recommended |

Date:

**HEAD OF DEPARTMENT**

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*\*(to be completed in case of sponsored/consultancy projects)*

- |                          |                                   |                                       |
|--------------------------|-----------------------------------|---------------------------------------|
| Arrangements given above | <input type="checkbox"/> approved | <input type="checkbox"/> not approved |
|--------------------------|-----------------------------------|---------------------------------------|

**DEAN, R & D**