



GOVERNMENT OF SINDH
SINDH HIGHER EDUCATION COMMISSION

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Block-4, Karachi — Phone: 021-99332669-71
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APPLICATION FORM

GRANT FOR ORGANIZING INTERNATIONAL CONFERENCE / SYMPOSIUM-2025-26

1. DETAILS OF EVENT: (Please tick the appropriate box)	
a) Conference	<input type="checkbox"/>
b) Symposium	<input type="checkbox"/>
Title:	
Venue:	
Date(s)	
Scope of the Event	
Follow up events as a result of previously funded conference /symposium by SHEC during FY 2024-25 (like MoU , joint project with national/international speakers and participants' institutions)	
Conference/ Symposium Recommendations' Dissemination List of departments/ organisations/agencies (Attach list on separate sheet, if required)	
Institutional level implementation (if any) in terms of curriculum development, content up-gradation, R&D initiative etc. (Attach documentary evidence or details on a separate sheet if required)	
Relevance and Scientific Significance of the Event with Reference to Existing National & International	

Needs	
Collaborating Institutions (Sindh HEC encourages collaborations among institutions working in similar disciplines) <i>Public University/DAI required collaborating with Private University/DAI and Private University/DAI required collaborating with Public University/DAI.</i>	
No. of Local Participants: Faculty Members of Universities across Pakistan	List may be attached as Annexure I
No. of Foreign invited speakers:	List may be attached as Annexure II
No. of National invited speakers:	List may be attached as Annexure III
No. of Organizing Committees	List may be attached as Annexure IV
Benefits to Sindh/Pakistan	List may be attached as Annexure V
Themes of the Conference/Symposium	List may be attached as Annexure VI

2. DATA OF ORGANIZER/ UNIVERSITY/DAI:

Name of University/DAI:			
Patron:			
Name of Principal Organizer:			
Department / Institute:			
Designation:			
Faculty Distribution of University <i>*Ph.D. faculty members of the University/DAI must be 40% or above of the total faculty members)</i>	Total Number of Ph.D. Faculty Members	Total Number of Non-Ph.D. Faculty Members	Total Number of Faculty Members
Details of Partners: (Industry/Academia)			
Postal Address:			
Phone & Fax:			
Email ID:			

2. BUDGET OF THE EVENT: (Sub-heads can be changed with event requirements)		
Note: Please refer Review and Scrutiny Form for Conference / Symposium (before filling it)		
Head of Expenditure	Amount	Details
Air Tickets for International Invited Speakers <i>*(Not less than 5 for Conference 2 speakers can attend physically and 3 online)</i> <i>*(1 physical for symposium)</i>		
Remuneration for International Invited Speakers		
Air Tickets for National Invited Speakers <i>*(2 physical for Conference)</i> <i>*(1 physical for symposium)</i>		
Remuneration for National Invited Speakers		
Accommodation for Invited Speakers		
Entertainment (<i>Lunch & Tea Only</i>) <i>*(Dinner not included)</i>		
Publication (<i>Conference Proceeding Only</i>)		
Stationery (<i>Only Consumable Items</i>)		
Conference/Symposium Gifts / Giveaways		
Contingencies (maximum 5%)		
Grand Total		
In Words:		

4. DETAILS OF FUNDINGS FROM OTHER SOURCES:

Names of other funding agencies	Amount (Rs.)	Status

5. GRANT DESIRED FROM SINDH HEC

Head of Expenditure	Amount
Total Expected Expenditure	
Earnings from Registration from local and international participants	
Earnings from other sources/agencies	
Total Grant requested from Sindh Higher Education Commission	

6. UNDERTAKING BY THE PRINCIPAL ORGANIZER

<p>On behalf of the Organizing Agency and Working Committees, I hereby undertake and affirm that:</p> <ul style="list-style-type: none"> ❖ If the grant is provided, I shall be responsible for its proper utilization and submitting the accounts of expenditure against the grant for its adjustment, duly audited by the
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university audit, immediately after concluding the event.

- ❖ I shall ensure the acknowledgement of Sindh HEC contribution in the proceedings of the event.
- ❖ In case of cancellation or postponement, I shall be responsible for timely intimating Sindh HEC and will arrange for immediate refund of the grant provided.

SIGNATURE OF PRINCIPAL ORGANIZER
WITH OFFICE STAMP & DATE

7. RECOMMENDATIONS FROM DIRECTOR ORIC/RESEARCH

I recommended this conference / symposium to Vice Chancellor / President / Rector.

SIGNATURE OF DIRECTOR ORIC/RESEARCH
WITH OFFICE STAMP AND DATE

8. RECOMMENDATIONS FROM VICE-CHANCELLOR

I agree and support the event to be convened and strongly recommend the quantum of financial assistance, as requested through this form.

SIGNATURE OF VICE
CHANCELLOR/PRESIDENT/RECTOR WITH OFFICE STAMP AND DATE

ANNEXURE I

Local Participants - Faculty Members of Universities across Pakistan

<i>S. NO.</i>	<i>NAME</i>	<i>UNIVERSITY</i>
1		
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ANNEXURE II

INTERNATIONAL INVITED SPEAKERS

<i>S. NO.</i>	<i>NAME</i>	<i>UNIVERSITY</i>
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ANNEXURE III

NATIONAL INVITED SPEAKERS

<i>S. NO.</i>	<i>NAME</i>	<i>UNIVERSITY</i>
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ANNEXURE IV

ORGANIZING COMMITTEE

S. No.	Name / Designation / Department / University of Person	Role in Event Management
1		
2		
3		
4		
5		
6		

ANNEXURE V

THEME OF CONFERENCE / SYMPOSIUM

SUB-THEMES

S. No

Name of Theme

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8

ANNEXURE VI

BENEFITS TO SINDH/PAKISTAN

ANNEXURE VII

DETAILS OF INDEXING OF THE CONFERENCE (if any)

ANNEXURE VIII

LIST OF REVIEWERS (other than TPC/ if any)

ANNEXURE IX

TIME LINE OF THE PEER REVIEW PROCESS