



Academic Event Approval Performa

(Please Submit this Performa 95 days before the Conference, 36 days before any other events and 07 days before for events referred at x, xi of General Guidelines in IIU SoPs/Code of Conduct to Organize Academic Events)

1. **Nature of Event** (Tick Relevant Box): Conference Symposium Seminar Guest Lecture
Training Workshop Colloquium **OR** Event (referred at x or xi of General Guidelines in IIU SoPs)
Pls. Specifically, mention here: _____
2. **Level:** National International
3. **Event Focal Person/Organizer(s):** _____ Designation: _____ Cell no: _____
4. **Department:** _____ Faculty/Institute/Academy/Center: _____
5. **Title of the Event:** _____
6. **Proposed Venue:** _____ Guest House Requirement: Yes No
7. **Date(s):** _____ No. of Day(s): _____
8. **Time:** From _____ (A.M./ P.M.) To _____ (A.M./ P.M.)
9. **Funding** (Amount PKR): _____ Funding (Source): HEC / (any other) _____
10. **Last Event organized** by the Department / Faculty / Institute / Academy (Date & Title): _____

11. Speaker(s) Details (Use additional sheet if the number of speakers is more than five):

Serial No.	Speaker(s) Name	Designation/Status/Profile (*Attach as Annexure for Bio/CV)	Address	Contact No.	E-mail
01					
02					
03					
04					

12. Chief Guest/ Guest(s) Details (Use the additional sheet, if the number of guests is more than two):

Serial No.	Chief Guest/ Guest(s) Name	Designation/Status/Profile (*Attach as Annexure for Bio/CV)	Address	Contact No.	E-mail
01					



13. Focus/Objectives of the Event:

14. Outcomes of the Event (Use the additional sheet(s), if necessary) [Feedback form should be submitted after the event to ORIC]:

15. Detail of Co-organizers (If any, otherwise write N/A): (Use the additional sheet if the number of Co-organizers/Members is more than two):

Sr. No.	Co-organizer(s)/Member(s) Name	Designation	Contact No.	Signature
01				
02				

16. Name & Signatures (Incharge Departmental Activities Committee/Focal Person): _____

17. Approval of the Departmental Board / Program Committee (where Dept. Board does not exist):
Attach Minutes of the Board (Annexure –) for events other than those mentioned at x, xi: _____

18. Recommendations of Dean/DG/Executive Director: _____

_____ **Sign. & Stamp:** _____ **Date:** _____

19. Approval of Vice-President (Academics/Female Campus) (only for events referred at x, xi of General Guidelines): _____

For Official Use for Academic events except the events referred at x, xi of General Guidelines):

Date (Proforma Received in ORIC):	Venue(s) Availability Confirmation:
No. of Days Remaining for the Event:	Date Meeting of TG & CSW Committee:
The Decision of the TG & CSW Committee:	Remarks of the TG & CSW Committee (if any):
Date & Approval Letter / Sanction No:	Rejection (Mention the Reason):
