

CECOS UNIVERSITY
Training Authorization Proforma

ORIC – P3

Name: _____ Designation: _____

Department: _____

Training Title: _____

Type of Training (e.g., lecture, hands-on, online etc): _____

Name of Organizer and/or Lead Person: _____

Does the training meet International Standards (i.e., ISO9001)? _____ YES _____ NO

Training Venue (if not **Online** or **in-house**): _____

Training Date(s): _____ Duration of Training : _____ Days

Training Cost: _____ Earlybird Discount (if any): _____

Is the training being fully/ partially funded through another source: _____ YES* _____ NO

HOW WILL THIS ACTIVITY BENEFIT YOU or CECOS? (use extra sheet if required)

ESTIMATED COST

<u>Registration</u>	<u>Travel</u>	<u>Accommodation</u>	<u>DA/Meals</u>	<u>Other*</u>	<u>TOTAL</u>
Rs _____	Rs _____	Rs _____	Rs _____	Rs _____	Rs _____

* If other, please submit details

SUBMITTED BY

Name *Department* *Date* *Signature*

ENDORSEMENT by HoD

Name *Department* *Date* *Signature*

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CHECK LIST: to be verified by ORIC

1. Has the applicant submitted content of training via hard/soft-copy of program, brochure, email, etc)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Has the applicant submitted profile of trainer(s)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have training details (e.g., type, venue, duration, registration cost, etc) submitted by applicant been verified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Is the budget requested to attend the training reasonable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Will applicant's teaching or other institutional commitments be affected?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, have the necessary arrangements been made?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

REMARKS (if any):

ENDORSEMENT by DIRECTOR, ORIC

<i>Name</i>	<i>Date</i>	<i>Signature</i>
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ENDORSEMENT by DEAN

<i>Name</i>	<i>Department</i>	<i>Date</i>	<i>Signature</i>
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ENDORSEMENT by DIRECTOR, FINANCE

<i>Name</i>	<i>Date</i>	<i>Signature</i>
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RULES

1. Applicant registering in a training program will list their affiliation with Department and CECOS University.
2. One applicant can participate in maximum of two (2) training programs per calendar year.
3. A maximum of PKR 40,000 will be reimbursed to an applicant per training program.
4. Upon completion, applicant will submit soft/hard copies of any literature, software, content etc. that is provided to them during their training program to ORIC.
5. Upon completion, applicant will disseminate their learning outcomes in the form of a formal seminar at CECOS University.
6. Training program registration fee will be paid in advance by CECOS University. Other expenses, however, will be reimbursed only after submission of relevant proof and receipts (see below).
7. PREFERENCE WILL BE GIVEN To APPLICANTS who:
 - Can provide solid reason(s) as to why the training will benefit them or the University.
 - Acquire full or find partial funding or discounts from sources other than CECOS University.
 - Submit the undertaking in Form-A

APPLICATION PROCEDURE

1. Training Authorization Proforma is submitted to respective HoD.
2. HoD submits the duly signed proforma to ORIC.
3. After endorsement, ORIC forwards proforma to Dean for approval with onward processing by Director Finance who after consulting with VP, Finance dis/approves the request. Applicant is informed of this outcome.

REIMBURSEMENT PROCEDURE

1. After return, applicant shall fill their TA/DA proforma along with original receipts and other required documentary evidences to ORIC.
2. ORIC will review the reimbursement claim and after verification forward it to the Competent Authority for approval and onward release of funds by Finance.

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FORM – A

Upon completion of training, the undersigned understands that s/he will be required to deliver a formal seminar during which learning outcomes from their training will be shared with the relevant audience at CECOS University.

Signature of Applicant Date