**Feedback Form for PHEC International Travel Grant**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Applicant Details** | | | |
| Name |  | | |
| CNIC/Passport Number |  | | |
| Contact Details | Mobile: Email: | | |
| Designation |  | | |
| University/College  (Place of posting) |  | | |
| 1. **Description of Conference/Seminar/Symposium/Workshop** | | | |
| Event Name |  | | |
| Event Venue |  | | |
| Organizer of the Event  (name of university/society) |  | | |
| Start Date |  | End Date |  |
| 1. **Focus of the Conference/Seminar/Symposium/Workshop** | | | |
|  | | | |
| 1. **Brief Description of Exposure & Learning to Latest Trends and Techniques in Research of Other**   **Countries** | | | |
|  | | | |
| 1. **Expected Opportunities for International Collaboration** | | | |
|  | | | |
| 1. **Cascading Plan of Knowledge Sharing with Institutional Fellows and Peers** | | | |
|  | | | |
| 1. **Any further suggestion, you would like give** | | | |
|  | | | |

Signature and Name of the Grantee Signature and official Stamp of HOD

**Date: Date:**

Note:

Feedback Form duly signed by the Head of Department needs to be submitted to PHEC along with Reimbursement Claim.