

Financial Assistance -Request Form

Faculty Name	Mr. S. S	Sathish					
Department		tment of	Tamil				
Designation		ant perof					
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			1		Wiembership		Specify
Name of the Event	Tamil	Elakkiya	\ Vahaimai	ha Our	o & Vazhviy	0 0 0 0 11	
Venue of the Event	Padmo	avati ante	& Saince	- 00.	ge for wo	al Lindha	ruhalun
Date/duration of the Event		1 arch . 201		Call	rate for mo	meh	
Request Amount	Ps. 30	0					
Sanctioned Amount	Pg. 30						

Signature of the Faculty Member

Signature of the HOD





Affiliated to Thiruvalluvar University, Vettere, Recognized under section 2(f) of the UGC Art. 1955

Financial Assistance - Request Form

Faculty Name	Dr.V.	tari vi jayo	× do no								
Department		r go tram									
Designation		Assistant professor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other				
Financial Request to Attend (Put A Tick Mark In			1		Weineership		Specify				
The Relevant Field)											
Name of the Event	Tanil ele	alekiya vah	nimaihalum	ا امر	a Ihvigal sin	11 '					
Venue of the Event	Padmav	ati ants &	Science col	0000	annigal lin	dhanifal	um				
Date/duration of the Event		un . 2019	Boeno un	wye.	to now h						
Request Amount	14.300										
Sanctioned Amount	Ps. 300										

Signature of the Faculty Member

Signature of the HOD

Principal

SCIENCE COLL SOLL STATE OF THE PROPERTY OF THE

PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLE POST



Affiliated to Thiruvalluvar University, Vellore. Recognized under section 2(f) of the UGC Act. 1956

Financial Assistance - Request Form

Faculty Name	Dr. P. B	interaction					
Department		ient of To	amil				
Designation	1021	int profe					
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
Financial Request to Attend			1		Membership		Specify
(Put A Tick Mark In The Relevant Field)							
Name of the Event	Panthe	rai Padrize	egal tamba	Aux .	anpattu kw	g 0	
Venue of the Event	theiva	nnai Amy	mal colle	mo A	anpattu kw	wkal	
Date/duration of the Event		. 2019		a 10	women		
Request Amount	Ps. 200						
Sanctioned Amount	12.200						

Signature of the Faculty Member

Signature of the HOD

A. Hard No. 2

PRINCIPAL

PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMEAI.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1959.

Financial Assistance - Request Form

Faculty Name	Mr.s.	Seundoviaja	lh							
Department		Department of Tamil Assistant professor								
Designation										
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other			
Financial Request to Attend (Put A Tick Mark In			1		Membership		Specify			
The Relevant Field)										
Name of the Event	Panthura	i padaipu	gal lambage	i ba ba	npattu kuru					
Venue of the Event	Theivar	mai Ammo	I college	Day we	npatra kuru	kal				
Date/duration of the Event	25.9.		-c wrige	for we	omr D					
Request Amount	14.200									
Sanctioned Amount	14.200									

Signature of the Faculty Member

Signature of the HOD

A. Hhand No 2-

STINATION STANSANDING OF STANDANDS

PRINCIPAL

PRANCIPAL

PRANCIPAL

VILLIANUR POST-605 110

PERANDAL



Financial Assistance - Request Form

Faculty Name	Mr. A.16	Growther	n mi								
Department		Department of english									
Designation		Assistant professor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other				
Financial Request to Attend (Put A Tick Mark In		G.	\mathcal{L}		Weinbership		Specify				
The Relevant Field)											
Name of the Event	Regional	l literatu	re and tran	station	24, 1, 1, 1, 1						
Venue of the Event			ge of Arts								
Date/duration of the Event		2p. 2019	20 4143	& DUC	n ce						
Request Amount	Ns. 600			100							
Sanctioned Amount	12. 600										

Ju. Gouther Signature of the Faculty Member

Signature of the HOD



RAAK ARTS & SCIENCE COLLEGE PERAMBAI.



Financial Assistance -Request Form

Faculty Name	Mrs. O	1. Pouryadh	unehin:				
Department	1	ment of e					
Designation		nt professo					
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
Financial Request to Attend					Membership		Specify
(Put A Tick Mark In The Relevant Field)		-	1				
Name of the Event	Region	al literat	we and In	anslat	in all dia		
Venue of the Event	Hindus	than colle	Rob Arts &	20.50	or) studies		
Date/duration of the Event		up. 2019	0.11.174	Juer	ce		
Request Amount	Ps.600						
Sanctioned Amount	Ps. 600						

Signature of the Faculty Member

Gow hours

Signature of the HOD



Financial Assistance - Request Form

Faculty Name	Dr. S. A	Anandhara	i								
Department		neut of e	0			7					
Designation		Assistant of professor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)		1			Memoership		Specify				
Name of the Event	Pronunc	riation exi	Us and its v	nia lal							
Venue of the Event	_		ce college								
Date/duration of the Event		ug, 2019	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
Request Amount	Pg. 300										
Sanctioned Amount	Rs. 300						ti .				

Signature of the Faculty Member

Signature of the HOD





Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956

Financial Assistance -Request Form

Faculty Name	Dr.R.	Dr. R. Velmurugan									
Department		Department of english									
Designation		Assistant Professor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)							Specify				
Name of the Event	Pronur	rciation Me	u'hs and i-	to wie	P of						
Venue of the Event	V-CV-CV-	nts & Scien									
Date/duration of the Event		ug. 2019									
Request Amount	Ps. 300										
Sanctioned Amount	Ps. 300										

Signature of the Faculty Member

Gow how,
Signature of the HOD

Horned No 2.

SCIENCE COLL

PRINCIPAL

PRINCIPAL

PRANCIPAL

PRANCIPAL

PRINCIPAL



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(t) of the UGC Act, 1956,

Financial Assistance - Request Form

Faculty Name	0	- 11 01	. 11				
Department	1	1 Hugesh	,				
Designation		artment	of Engl	ish			
Academic Year	Seminar	18 tant Workshop	Conference	1			
		Workshop	Conference	FDP	Professional	NPTEL	Other
P'					Membership		Specify
Financial Request to							Promy
Attend		~					
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Day a		0 11		1 +		
Venue of the Event	1700	nun Ceali	on Bhills	ar	ed ils u	tield	
Date/duration of the		S costs	4 Science	Coll	2 290		
Event		. Aug. 20			U		
Request Amount	R). 30						
Sanctioned Amount	Rs 36						

Signature of the Faculty Member

Signature of the HOD

. Home No. Zu.

P SCIENCE COLLAND TO SCIENCE COL

PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

FERAMBAL



Financial Assistance – Request Form

Faculty Name	Dr. M	· 3athya	graf				
Department			of Engli	184			
Designation	te	118taut	molesies				
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
					Membership		Specify
Financial Request to							
Attend		1					
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Pank	uciation	spills a	nel j	& wield		4
Venue of the Event	33	arts & s	Skills a	lleca	g.		
Date/duration of the				1			
Event	13	Aug 2019	7				
Request Amount	Rs. 300	>					
Sanctioned Amount	Ry . 300	9					

Signature of the Faculty Member

Gow howi

Signature of the HOD

Principal





Financial Assistance - Request Form

Faculty Name	Ms. A	. Sama	anan				
Department	0.000	purtment	-11	S			
Designation		tante Po	б				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			1				
Name of the Event	Mato	- amatical	lauie	and	Loundation	۸	
Venue of the Event	Sacr	ed Hear	+ college	i i	foundation		
Date/duration of the			concey				
Event	29	NOU 20	19				
Request Amount	Rs.3	0.6					
Sanctioned Amount	Ps . 30						

Signature of the Faculty Member

Signature of the HOD

a. Hhund No. 2.





RAAK

ARTS AND SCIENCE COLLEGE

Affiliated to Thiruvalluvar University, Vellore. Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Ms. 15	Public	anai				
Department	990	intment	of stall	3			
Designation		1 1	rolesson				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to							
Attend			1				
(Put A Tick Mark In							
The Relevant Field)						- 1	
Name of the Event	Mat	homatic	al logic	Cune	Foundat	inns	
Venue of the Event	Sca (2)	ed Hea	at coll	248	Foundat		
Date/duration of the		1,0		J			
Event	29	NOV 20	19				
Request Amount	29.5	Sac.					
Sanctioned Amount	.0-	00	×1000				

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAWBAI.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Ma. C	· Krusum	rainelan				
Department		stment of	Maths				
Designation	1	stant pr	de SSOD				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to		7 - 7 - 7					
Attend				1			
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Rosecon	L Parso	ectives i	n Ho	th matici &	its copol	lization
Venue of the Event	Sothy	abama	instite	0/ 50	th matici q cience And	technologia	94
Date/duration of the				b		(
Event	4 to 1	b. July.	2019				
Request Amount	Ro 50	20					
Sanctioned Amount	Rs 50						

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAL



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956,

Financial Assistance - Request Form

Faculty Name	Mr. I	Ramacho	indrain				
Department		street of	4				
Designation	Assi	1 7	professos				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend				J			
(Put A Tick Mark In The Relevant Field)							
Name of the Event	Resecu	sch mer	spectives	in.	Mathematic	s and i	toApplica
Venue of the Event	Souther	abama.	instation of	1 Sa	ience and	techno	1094
Date/duration of the							0)
Event	4 to 16	Suly 2	619				
Request Amount	R. Sc	ъ					
Sanctioned Amount	^	00					

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Hr. 19	South	Elmathan				
Department	Dopus		of chamis				
Designation	1	3819 + aut	D				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In							Л
The Relevant Field)							
Name of the Event	Emeri	ing the.	ach in c	hemis	154	-	
Venue of the Event	Thirm	Vika	bournen	d di	to college		
Date/duration of the							
Event	23.	Sep 2019					
Request Amount	B . 2	•					
Sanctioned Amount	Ry . 2						

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
PRINCIPAL
PRINCIPAL
PRINCIPAL
VILLIANUR POST-505 110
PERAMON.



RAAK

ARTS AND SCIENCE COLLEGE

Affiliated to Thiruvalluvar University, Veltore, Recognized under section 2(f) of the UGC Act, 1956

Financial Assistance - Request Form

Faculty Name	Hs.C	Toovan	athinan				
Department		1 1	of chemis	t34			
Designation		sis tant	professor				
Academic Year	Seminar	Workshop	Conférence	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend						1 - 1	1
(Put A Tick Mark In The Relevant Field)	-						
Name of the Event	Zmos	ing t	rends in	- cha	in istry		
Venue of the Event	This	. Vi. Ka	Coursine	int d	mistry	72	
Date/duration of the	- FAZIS	A:			0		
Event	23	Sep 2019					
Request Amount	Rs. 25	0					
Sanctioned Amount	Rs. 25		4)				

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RESK ARTS & SCIENCE COLLEGE
VILLIANUR POST-505 110
PERAMONI.



RAAK ARTS AND SCIENCE COLLEGE

Affiliated to Thiruvalluvar University, Veilore,
Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Da	Sofin					
Department	Den	artment	d chou	nista	-		
Designation	43	distant	prolesson	,			
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to							
Attend			1				
(Put A Tick Mark In	-						
The Relevant Field)							
Name of the Event	Ac	diancos	in chem	i cal	Scource	l	
Venue of the Event	Popl	mulage	in chem	,	Ducha		
Date/duration of the		,					-
Event	6 A	psil 20	19				
Request Amount	Rs. 5	. 60					
Sanctioned Amount	R1.50			7-7-7-			

Signature of the Faculty Member

Signature of the HOD



RAAK

ARTS AND SCIENCE COLLEGE

Affiliated to Thiruvalluvar University, Vetlore, Recognized under section 2(f) of the UGC Act, 1956

Financial Assistance -Request Form

Faculty Name	D97 a	meetha					
Department		artment	Chemi	1914			
Designation		sistant	Mofesson Conference	- 3			
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			1				
Name of the Event	Adva	Mro3	in Chem	i cal	Science		
Venue of the Event Date/duration of the Event	Poon	puhas	college				
Request Amount	Rs 50		/				
Sanctioned Amount	RS 50						

Signature of the Faculty Member

Signature of the HOD

Principal

SCIENCE COLLAND

PRINCIPAL
PRINCIPAL
PRINCIPAL
VILLIANUR POST FOS THE
PERAMSAL



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956

Financial Assistance - Request Form

Faculty Name	Mas.	R. Sak	thicken				
Department		eartine ut		outes	Science		
Designation	A.		0 /		31 31 11 11		
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
4					Membership		Specify
Financial Request to							
Attend	1						
(Put A Tick Mark In					*		
The Relevant Field)							
Name of the Event	Deen	Le con	ning to	laigu	as in la	the con cop	plications
Venue of the Event	Maroca	2 Schola	nt eno	ingel	es in la	e II	- CC-OUI - CY
Date/duration of the	The state of the s	301112		o www	ing coney.		
Event	13 to	17. May.	2019				
Request Amount	R8 . :3	800					
Sanctioned Amount	Ry . 30						

Signature of the Faculty Member

Signature of the HOD

A. Harring No. 2.

A SCIENCE COLLY AND SCIENCE COLLY

PRINCIPAL

PANK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 118

PERAMBAL



RAAK ARTS AND SCIENCE COLLEGE Affiliated to Thiruvalluvar University, Veltore. Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Mr. C	· Kerish	nala								
Department		Department of computer Science									
Designation	N.	eminar Workshop Conference FDP Professional NPTEL Oth									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	1										
Name of the Event	Deep	Lo armi	y techique	es i	in healthcar	e applic	cation				
Venue of the Event	Mer	co School	lenk en	gine	ering Co	llege					
Date/duration of the Event			1ay 201		J	V					
Request Amount	123	300									
Sanctioned Amount	P3	200									

Housham. Signature of the Faculty Member

Signature of the HOD Principal

VILLIANUR POST ..



RAAK ARTS AND SCIENCE COLLEGE Affiliated to Thiruvalluvar University, Velfore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	297.	S. Bhw	ana				
Department				es S	Scienco		
Designation	As	istant	omput professo	9			
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	1						
Name of the Event	Deep	Jeary	ing tech	i gre	y in hea	theave a	application
Venue of the Event	Норс	o Schol	enk ou	1934	posing C	ollege	
Date/duration of the Event			May 20			U	
Request Amount	R	. 300					
Sanctioned Amount	Rs.	306		- 1111			

Signature of the Faculty Member

Signature of the HOD Q. Hand No. 2.

PRINCIPAL RAAK ARTS & SCIENCE COLLEGE VILLIANUR POST-605 110 PERAMBAL.



Financial Assistance - Request Form

Faculty Name	D2 "	B. Bolu	14				
Department	2	art me ut	1	war	ty Scion	C 2	
Designation	1	Wistant	grider	1			
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
					Membership		Specify
Financial Request to							
Attend	1						
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Deep	Le corn.	ing tech	1 0116	in health	the coul of	u slictic
Venue of the Event	Menc	2 Schools	uk en	inos	y in health	llogo	7.5.42
Date/duration of the	7	U	J.)	J	
Event	13	to 17	May 201	9			
Request Amount	Rg - 5	200					
Sanctioned Amount	Δ.	06					

Signature of the Faculty Member

Signature of the HOD Principal No. 2...

RAAK ARTS & SCIENCE COLLEGE VILLIANUR POST-605 110 PERAMBAT



Financial Assistance - Request Form

Faculty Name	Mrs. N). Manir	nozhi								
Department		reportment of computy science									
Designation		Sistant	Molesto3	**************************************							
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	Л										
Name of the Event	Deep.	learning of	or Medical i	mage	thousis d	alle mes &	fiture				
Venue of the Event	1At a	lege of	engi nee	ciug .	and techno	logy					
Date/duration of the Event	1	30 April)							
Request Amount	R.S	00									
Sanctioned Amount	Rs. 5										

Signature of the Faculty Member

Signature of the HOD Principal



VILLIANUR POST-605 110



Affiliated to Thiruvalluvar University, Vellore. Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Mass. 1	R. Sugar	1400				
Department		stmout	(/,	outes	Scano		
Designation		esistant	λ				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	1						
Name of the Event	Deer	lecom	ing for	Hed	ical image A	naylis cho	Monge & Li
Venue of the Event	AAA	college	y engin	eei'n	g and tec	mo/0 30	
Date/duration of the Event	1	•	t J peril 2019				
Request Amount	Rs. 5	300					
Sanctioned Amount	Rs.	500					

Signature of the Faculty Member

Signature of the HOD

1. Harrid No. 2

P SCIENCE COL

PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(t) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	MU.S.	lamua.					
Department	Bepa	theut	of Com	inter	Science		
Designation	1	ssista ut	I moles	2097			<i>y</i>
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	4						
Name of the Event	Deap .	learning	Los Medi	ral.	image Ana	isis chal	langing fi
Venue of the Event	AAA	Collego	el evano	estil	image Ana	Luology	1 10
Date/duration of the	-, 4, 7,	7	8	(1)	J	3)	
Event	29	to 30 1	pril 20	19	n		
Request Amount	R	.500		1			
Sanctioned Amount	Rg	,500					

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 110
PERAMBAI.



Affaliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Man . /	r. Sugu					
Department	Depa	1 1	of comp	riter	80301.00		
Designation		Lie tunt	insolouso		Scence		
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other
					Membership		Specify
Financial Request to							
Attend	1.						
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Dean	laasasia	la Mali		ruge Angys	· 1 11	. 1
Venue of the Event	AAA	calles a	en gine	<u> </u>	and techn	s chana	my to fer
Date/duration of the	7(717)	onego y	engane	oning	and Mich	01099	
Event	29 10	30 Ajari	12019				
Request Amount	21.500	U	71 -01)				
Sanctioned Amount	R. 500						

Signature of the Faculty Member

Signature of the HOD

Principal

PSCIENCE COLLING & SCIENCE & SCIENCE

PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-505 116

PERAMEAL



Financial Assistance - Request Form

Faculty Name	Mrs. R.	Devaki									
Department	Departs	Department of commerce									
Designation	Assig	Assistant professor									
Academic Year	Seminar	eminar Workshop Conference FDP Professional NPTEL Membership									
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			1				Specify				
Name of the Event	Recei	ut Trends	in finance	ial o	1arket						
Venue of the Event		The state of the s			callege fo	Wome!	1				
Date/duration of the Event		April, 20									
Request Amount	Ps. 300										
Sanctioned Amount	B. 300										

R - Dotaki Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 110
PERAMBAL



Financial Assistance - Request Form

Faculty Name	Mrs. A.	Mrs. A. Sargatha									
Department	pepart	Department of Commerce									
Designation	Assista	Assistant professor									
Academic Year	Seminar	Seminar Workshop Conference FDP Professional NPTEL Membership									
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	39										
Name of the Event	Recent	Trandy in	financial	May 6	l Let						
Venue of the Event	Bhara	thidas as a	unts and scie	nle i	college for u	Jones					
Date/duration of the Event		pril. 201			1.0						
Request Amount	ps. 30	Rs. 300									
Sanctioned Amount	Pg. 30	10					-				

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 110
PERAMBAL



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	190.5.1	Mr. S. Lokeshkumar									
Department	Depar	Department of commerce									
Designation	Assis	Assistant professor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In											
The Relevant Field)											
Name of the Event	Entrepa	renewship	education a	anol to	aining						
Venue of the Event			cience colla								
Date/duration of the Event	20.	Dec. 201	4								
Request Amount	Ps. 30	6				and the same of th					
Sanctioned Amount	Rs. 300	>		************							

Signature of the Faculty Member

Signature of the HOD

HOD Principal



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.



Financial Assistance -Request Form

Faculty Name	Mr.S.	Mr.S. Kalimathu									
Department	Depoint	Department of commerce									
Designation	Assisto	Assistant professor									
Academic Year	Seminar	NPTEL	Other Specify								
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			1								
Name of the Event	Entre	prenewah	ip educati	on our	d training	-	0.				
Venue of the Event	E.S A	rts and sc	ionce colle	ge	· ·						
Date/duration of the Event	20.	Dec. 20	19								
Request Amount	Ps. 300	0			15 M 16 M						
Sanctioned Amount	Rs. 300										

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RAAK ARTS & SCIENCE COI LEGE
VILLIANUR POST STA



Affiliated to Thiruvalluvar University, Vellore. Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	MAS. G	anagaval	ly				
Department	Dapa	tment	of com	nerco	ĺ		
Designation	l '.	318 faut	molesia				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to							
Attend			1				
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	Cale	beration	d a11	בי או	ting -/an	1.	
Venue of the Event	P	ovelic hos	sy Um	inera	ting too		
Date/duration of the					J		
Event	18	to 19.)	lardi 201	9			
Request Amount	RI	. 100					
Sanctioned Amount	Rs	400					

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.



Recognized under section 2(f) of the UGC Act, 1956

Financial Assistance - Request Form

Faculty Name	Mrs	. A.Sw	onthy				
Department) e Partmo		vmoxCo)		
Designation		A wistant	0.				
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to							
Attend							
(Put A Tick Mark In							
The Relevant Field)							
Name of the Event	C	alibratio	n ed Ac	counti	ing tools		
Venue of the Event		Pondich	on of Aci	endly	June		
Date/duration of the			0	• (
Event		18to 19.	march 2	-019			
Request Amount		Ps. 400					
Sanctioned Amount		Rs.40			34		

Signature of the Faculty Member

Signature of the HOD

Human No. 2

PANSON PARTIES PARTIES

PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANIES 5 110
FERANCIAL



Financial Assistance - Request Form

Faculty Name	D.	r.P. Ka	thavarau	an							
Department		Department of Commerce									
Designation		A yistort Professor.									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			~								
Name of the Event		Bush	ness Resease	ich							
Venue of the Event	S	0.53			and techn	nopou					
Date/duration of the Event			3,12,201		21101 22/011	00					
Request Amount		Ng. 300	0								
Sanctioned Amount		14.30			9						

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL

PAAK ARTS & SCIENCE COLLEGE

VILLIANUR TO: 5 116

PERABBAI.



Affiliated to Thiruvalluvar University, Veltore, Recognized under section 2(f) of the UGC Act, 1956,

Financial Assistance - Request Form

Faculty Name		D. 80.	Baranie	rhare	W.						
Department		Defautment of Commerce									
Designation	H 1	Augletant Proleyon									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)		36	V								
Name of the Event		Bux	iners Roy	nrh							
Venue of the Event	Ş	Dm Ind	tituto of	Scio	rea and t	or hand or	an a				
Date/duration of the Event		all the cook than	18.12-201		TO STORE	01 -00	90				
Request Amount		M.3	90								
Sanctioned Amount		ns.3									

Signature Statute Faculty Member

Signature of the HOD

Principal

A SCIENCE COLL

PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 110
PERAMBAI,



Financial Assistance -Request Form

Faculty Name		Mr.R.	Prodap				
Department	-	DePartmen		6	01110	11	
Designation	_	Avsish	ant Profes		Administra HOD	guen	
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			V				Specify
Name of the Event		Pala of	Human	D -			
Venue of the Event		Tahous	Callon	Korc	teand science	Demond	
Date/duration of the Event		26.4.		of HV	ts and science	is for Wo	umon
Request Amount		Rs .300					
Sanctioned Amount		14.30					

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL RAAK ARTS & SCIENCE COLLEGE VILLIANUR POST-605 110 PERAMBAL



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name		Dr. C. Velacidham									
Department		Defalment of Business Administration									
Designation		A Wighout Printegor									
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify				
Financial Request to Attend (Put A Tick Mark In The Relevant Field)			V								
Name of the Event	T.	2000	Himore	Posc	www. Mama	John M. J.					
Venue of the Event		Td haya			ints and se		Mowan				
Date/duration of the			9	D	11.3 01.17	W. W.	WC411DIT(
Event		26.4	1.2019								
Request Amount		ry . :	300								
Sanctioned Amount		n	300								

Signature of the Faculty Member

Signature of the HOD

Principal



PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 118
PERAMBAL



Financial Assistance - Request Form

Faculty Name		Dr.S.	A rundo	eamos.	1					
Department	Department of BBA									
Designation		Assistant Protessor								
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify			
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	V									
Name of the Event	01	OPtimal Use of open across tookhing and Lowning Rajour								
Venue of the Event	(L. Amm's	Collaboration	- Anta	cml sciona) '	030			
Date/duration of the	Ü) 11003	ara boaria					
Event		16. F	26.2019							
Request Amount		Ps. 200	ř							
Sanctioned Amount		Ps. 200								

Signature of the Faculty Member

Signature of the HOD

Principal





Affiliated to Thiruvalluvar University, Veltore. Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name		Dr. R.	Sudhay	M			412		
Department	BBA								
Designation		Assistant Projector							
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other		
					Membership		Specify		
Financial Request to									
Attend	~								
(Put A Tick Mark In		•							
The Relevant Field)									
Name of the Event		D Primal	ties of o	Dan A	erous food o	012 01 1	.) 0-		
Venue of the Event	SL, A	mile Col	lage of And	· oad	cross teaching	Onor Jour	inning kejod		
Date/duration of the	<i>DC- F)</i>	many Con	1730	us unio	Stence				
Event		16.2.	2019						
Request Amount		Ps. 20)n						
Sanctioned Amount		Ps. 200							

Signature of the Faculty Member

Signature of the HOD

A. H. Principal No. 2.



PRINCIPAL
RAAK ARTS & SCIENCE COLLEGE
VILLIANUR POST-605 110
PERAMBAI.



Affiliated to Thiruvalluvar University, Vellore.

Financial Assistance - Request Form

Faculty Name		DY. N	Some	mem						
Department	BSA									
Designation		Amiltont Prolemon								
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify			
Financial Request to Attend (Put A Tick Mark In The Relevant Field)	<i>V</i>									
Name of the Event	OPLEM	el use of e	Pen Across	teashi	ing and Leas	unina Roz	OUNTOL			
Venue of the Event	St. An	un's Colle	ge of Arts	and c	cromo	0	owacs			
Date/duration of the Event		16. Feb	0	71.5						
Request Amount	4-200									
Sanctioned Amount	Ns.200									

Signature of the Faculty Member

Signature of the HOD

thrond No 2.



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance - Request Form

Faculty Name	Dr. Ramesh								
Department	BBA								
Designation	A Willout Protogon								
Academic Year	Seminar	Workshop	Conference	FDP	Professional	NPTEL	Other		
					Membership		Specify		
Financial Request to									
Attend									
(Put A Tick Mark In									
The Relevant Field)									
Name of the Event	Research	ch mothe	de and tack	m que	in Hunen	itios			
Venue of the Event			Maye of A						
Date/duration of the			0						
Event	1	2 - July	2019						
Request Amount	14-300								
Sanctioned Amount	N .300								

Signature of the Faculty Member

Signature of the HOD

A. Hhand No. Zo.



RAAK ARTS & SCIENCE COLLEGE VILLIANUR POST-605 110 PERAMBAL.



Affiliated to Thiruvalluvar University, Vellore, Recognized under section 2(f) of the UGC Act, 1956.

Financial Assistance -Request Form

Faculty Name		78. M	Johan						
Department		BBE							
Designation	Disistant Protessor								
Academic Year	Seminar	Workshop	Conference	FDP	Professional Membership	NPTEL	Other Specify		
Financial Request to Attend (Put A Tick Mark In The Relevant Field)		~							
Name of the Event	Researce	h moth	ale and t	-or line	Chos in Ma	1600	•		
Venue of the Event			Collans al	n.f.	and Scien	inamikal	λ		
Date/duration of the		000103	cockage of) +DW	CHO SCIEN				
Event		12. July	. 2019						
Request Amount		B · 300)						
Sanctioned Amount	B.300								

Signature of the Faculty Member

Signature of the HOD

. Harring No 2



PRINCIPAL

RAAK ARTS & SCIENCE COLLEGE

VILLIANUR POST-605 110

PERAMBAI.