**Assumption University**

AU-R3

**Application Form for Paper Presentation Grant**

**Duration: June 1, 20…. – May 31, 20….**

**Name-Surname:** …………………..………………………….………………….**ID No**:…….…………….

**Department:** …………………………………….…………**Faculty**…………………………………..……

**Title:**.....................................................................................................................................................................................................................................................................................................................................

**Condition 1:** **Presentation of research/academic papers or dissemination of creative works with quality weight of at least 0.2**

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| **Budget** | **Amount** | **Total****(Baht)** | **Evaluation Criteria** |
| Overall Expense for Paper Presentation (Domestic and Oversea)  | Maximum 50,000 in Thai Baht /Academic Year. |  |  National Conference  (Weight 0.2) International Conference  (Weight 0.4) |

 **Details of conference:**

|  |  |
| --- | --- |
| Title of the Event |  |
| Event Date (s) |  |
| Venue (City & Country) |  |
| Organizer of the Event (name of university/society) |  |
| Website address of the event |  |
| ***Please attach information regarding aims, objectives, themes, organizing committee and keynote speakers of the event.*** |

**Remark:** 1.I affirm that the substance of the research paper is based on the original research conducted by me/us. In case any plagiarism is proved, apart from penalties imposed, I will refund entire amount of grant.

2.I agree to follow the regulations concerning the payment of installments and understand that all expenditures that require receipts or other relevant documents will be presented to the Office of Human Resources Management. All funds under my control will be carefully spent and accounted for any expenses will be followed by the University Regulations.

3. I will summarize the Paper Presentation for any usefulness of teaching and learning on A4 paper(s).

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (…………..…………………..) **Fund Receiver**  \_\_\_/\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(….………………………...)  **Dean** \_\_\_/\_\_\_/\_\_\_ |  **Checked by** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **(Dr. Pornpop Seangthong)** \_\_\_/\_\_\_/\_\_\_ |
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| **Approved by** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  **(Assoc. Prof. Dr. Chanintorn Jittawiriyanukoon)** |
| **\_\_\_/\_\_\_/\_\_\_** |

 **Fund Provider** |