



# NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR CONTINUING EDUCATION CELL

## FORM CEC-01: PROGRAMME PROPOSAL

Coordinator-facing master application. CEC generates the Programme ID after receipt.

|                             |                                                      |
|-----------------------------|------------------------------------------------------|
| Programme ID (CEC use only) | CEC/_____/_____/_____/_____<br>Year Dept. Serial No. |
| Date of submission          | ____/____/____                                       |

### A. Programme identification:

☐ Short Term Course ☐ Certificate Programme ☐ Training Programme ☐ Workshop ☐  
Conference/Seminar ☐ Student Training/Internship ☐ Other

|                       |                                                    |
|-----------------------|----------------------------------------------------|
| Programme Title       |                                                    |
| Department / Centre   |                                                    |
| Programme description | Documents to be attached (250-300 words) /Brochure |

### B. Coordinator and co-coordinator

| Role                      | Name | Designation | Dept/Centre | Employee Code (EC) | Email / Mobile |
|---------------------------|------|-------------|-------------|--------------------|----------------|
| Programme Coordinator     |      |             |             |                    |                |
| Co-Coordinator (optional) |      |             |             |                    |                |

Financial authority may be exercised by the co-coordinator in the absence of the coordinator only against a written authorization from the coordinator, as per applicable institutional rules.

| Role                          | Name | Dept. & Institute | Email / Mobile |
|-------------------------------|------|-------------------|----------------|
| External Coordinator (if any) |      |                   |                |

### C. Programme schedule and academic structure

|                                                |                                  |
|------------------------------------------------|----------------------------------|
| Start date / End date                          | ____/____/____ to ____/____/____ |
| Number of programme days                       | _____                            |
| Total contact / instructional hours            | _____ hours                      |
| Assignment / project component (if applicable) | _____ hours / Not applicable     |
| Assessment / examination (if applicable)       | YES / NO                         |
| Continuing Education Units (CEUs) proposed     | _____ CEU/s                      |

One CEU is associated with 10 hours of instruction, 5 hours of in-class assignment and an end-course examination, with a minimum of 2 CEUs. CEC may verify the proposed CEUs during scrutiny.

[illegible]



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## G. Facilities and administrative support

☐ Classroom / Hall ☐ Laboratory / equipment ☐ Computing facility ☐ Guest House ☐ Other

**Guest House accommodation required, if requested above?**

☐ For - participants ☐ For - resource persons ☐ For - faculty/coordinators

**Number of beds needed in Institute Guest House:** \_\_\_\_\_

For venue (Assembly Hall, classroom, Senate room, seminar room, DM Sen Hall, SAC,) booking and guest house booking attach the appropriate form. Forms are available in <https://nitdgp.ac.in/p/downloads>

**Special Requests, if any:** (e.g. Travel by coordinator etc.) / official duty permission

☐ No ☐ Yes - details attached

## H. Funding plan

**Funding source:** ☐ Participant fee (*Draft announcement or brochure enclosed*)

☐ Sponsored (*Copies if relevant correspondence and financial approval enclosed*)

☐ Institute / CEC support (*financial approval enclosed*)

☐ Departmental support (*financial approval enclosed*)

☐ Other (specify)

**I. Estimated programme budget:** (All numbers will be adjusted at the end of the course on proportionate basis to match the gross receipts. In sponsored courses (e.g. QIP) please mail separate columns for the sponsored and general components. The CE overhead is 20% of gross receipts except for outstation courses where it 30%. There is no CEP overhead on QIP, ISTE, GIAN and such type of courses.)

| <b>Receipts</b>                                                                            | <b>Rupees</b> | <b>Expenditure</b>                                              | <b>Rupees</b> |
|--------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------|---------------|
| 1. From Sponsor :<br>(Enclose copy of financial sanction)                                  |               | 1. CEP overhead (20%)                                           |               |
|                                                                                            |               | 2. Coordinator's fee (<10%)                                     |               |
|                                                                                            |               | 3. Remuneration to faculty & staff members                      |               |
|                                                                                            |               | 4. Course materials, travel and other expenses                  |               |
| 2. From Participants<br>(Course fee per Participants Rs _____<br>× Number of Participants) |               | 5. Board, lodging & travel of participants and resource persons |               |
|                                                                                            |               | 6. Payment to Dept. for laboratory facilities                   |               |
| <b>Total</b>                                                                               |               | <b>Total</b>                                                    |               |



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## K. Declaration and recommendation

I certify that the information provided is correct and that the programme will be conducted in accordance with applicable Institute/CEC rules. I undertake to submit the required programme and financial closure documents within the prescribed period.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature  
Coordinator / Organizing Secretary

Department facilities requested will be provided.  
Personnel of the Department/Centre are permitted to assist the Coordinator/Organizing Secretary in conducting the course on payment of mutually agreed remuneration

**Head of Department / Centre recommendation:** ☐ Recommended ☐ Recommended with remarks  
Remarks (If any):

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Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature  
(Head, Dept/Centre \_\_\_\_\_)

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The proposal has been examined and is put up for consideration of Chairman (CEC).

Special points: \_\_\_\_\_  
(if any)

CEC Office

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The proposal is approved.

Chairman (CEC)

**(Director's approval is to be obtained for all off-campus courses and on-campus courses with gross budget exceeding Rs 2.00 lakhs.)**

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