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## S. B. Jain Institute of Technology, Management & Research, Nagpur

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### RESEARCH & DEVELOPMENT CELL

## Reimbursement Form

Publication in Journal

Academic Session

#### 1. Applicant Details

Name of Applicant			
Department			
Designation			
Email Id			
Contact Number			
Have you claimed earlier in the same head you are applying for in this academic session (Yes/No)		If yes then, number of claims	

#### 2. Publication Details

Title of Publication			
Name of Journal			
Impact Factor			
Journal Recognition (SCI/SCOPUS/UGC Approved/Other)			
Date of Publication			

#### 3. Details of Publication Fee

Particular	Amount claimed as per policy (in INR)	Amount Sanctioned (For Office Use)
Publication Fee		
<b>Total</b>		
<b>Total (in words)</b>		

#### 4. Declaration

I, hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand the consequences of the event of my information being found false or incorrect at any stage.

Date:

Signature of Applicant

Head of Department	Forwarded/Rejected	Remark:	Signature
Dean R&D	Approved/Not Approved	Remark:	Signature
Principal	Approved/Not Approved	Remark:	Signature

*Note: Enclose all the necessary and relevant copies of documents along with this application (for e.g. pre-approval, research paper, certificate, publication fee receipt, etc.)*