

## RESEARCH AWARD & HONORARIA APPLICATION FORM

PERSONAL DETAILS:	
Name:	
Designation:	
Department:	
Phone/Cell:	
Email:	
PUBLICATION DETAILS:	
Title of Journal :	
Name of Co-Author(s) (If Any):	
<b>Type of Publisher:</b> □ International Publisher	
☐ National Publisher	
Impact factor of the journal:	

LUMHS ORIC 1/2

Place of Publication:	
Date of Publication:	
ISBN Number :(Print/Electronic)	
Publication charges: USD	Equvelant in PKRs
Note: Hard Copy of the "Published paper	"must be provided along with Turnitin report of similarity index.
	Applicant Signature:
	Date:
RECOMMENDATI	ION BY THE HEAD OF DEPARTMENT
Comments (If any):	<del>-</del>
Signature & Official Stamp:	
Date:	_
For Office use only	

LUMHS ORIC 2/2

RECOMMENDATION BY THE DIRECTOR ORIC	
Comments (If any):	
Signature & Official Stamp:	
Date:	
APPROVAL BY DIRECTOR FINANCE	
Signature & Official Stamp:	
Date:	
APPROVAL BY VICE CHANCELLOR	
	-
Signature & Official Stamp:	
Date:	

LUMHS ORIC 3/2