



National Science Foundation

Support Scheme for Scientific Meetings and Events
(SSSME)

APPLICATION

Please refer to the Program Brief for details and guidelines of the SSSME at <http://www.nsf.ac.lk/index.php/grant-support/basic-research/meeting-events/support-scheme-for-scientific-meetings-events-sssme> before filling the application. The application must include all the details requested strictly according to this format.

All fields are mandatory; incomplete applications will be rejected at screening.

Name of the event:

Expected dates of the event:

Venue:

Name of the institution/university/professional scientific body organizing the event:

Names of collaborators (if any):

Sources of other financial support with conditions:

No.	Source of funding	Funding amount	Conditions

Agenda of the event ☐ (please attach the agenda to the application- **mandatory**)

PART I –ORGANIZATIONAL INFORMATION *(All fields are mandatory)***1. Name and designation of the responsible officer**

(to be used in all correspondence)

Official address:**Telephone:****Mobile:****Fax:****E-mail:****2. Type of Meeting**International ☐Regional ☐
(Asian/SAARC)National ☐Institutional ☐Conference ☐Workshop ☐Other ☐ *(if other, please specify below)*

.....

3. If the event is organized by a professional scientific body,**i). Where the Association is registered****ii). Registration number****iii). Total membership to date**

4. Other collaborative institutes and the nature of collaboration

No.	Name of the collaborator	Local or foreign (name country)	Nature of collaboration

5. Details of the Organizing Committee of the event

No.	Title	Name	Designation	Contact No. (mobile)	E-mail

PART II – INFORMATION OF THE EVENT *(All fields are mandatory)*

1. The purpose and the nature of the event

.....

.....

.....

.....

.....

.....

2. Objectives of the event

.....

.....

.....

.....

The event will: *(check appropriate box/es)*

Address improvements of the specific field	☐
Address globally important issues	☐
Address sectoral issues which have a significant national impact	☐
Address a currently prevailing national issue	☐

3. Expected output: *(check appropriate box/es and provide further information where necessary)*

Capacity building of academics/professionals/students	☐
Solutions for a globally important issue	☐
Solutions for a nationally important issue	☐
Improvement of current practices which will enhance the quality of delivery	☐
Effective international collaborations	☐
Mechanisms to enhance awareness of general public	☐
Exchange of knowledge about new findings and scientific advancement	☐
Information for policy recommendations	☐
Published proceedings accepted in SCOPUS or any other recognized indexing service	☐
Any other (please specify)	☐
.....	
.....	
.....	
.....	
.....	

4. Detailed expected impact of the event (150 words):

5. Relevant SDG's: *(check appropriate box/es)*

i. No poverty ☐	ii. Zero hunger ☐
iii. Good health & well-being ☐	iv. Quality education ☐
v. Gender equality ☐	vi. Clean water & sanitation ☐
vii. Affordable & clean energy ☐	viii. Decent work & economic growth ☐
ix. Industry, innovation & infrastructure ☐	x. Reduced inequalities ☐

xi. Sustainable cities & communities ☐	xii. Responsible consumption & production ☐
xiii. Climate action ☐	xiv. Life below water ☐
xv. Life on land ☐	xvi. Peace, justice & strong institutions ☐
xvii. Partnerships for the goals ☐	

6. Areas focused on: *(check appropriate box/es)*

i. Agriculture ☐	ii. Power & Energy ☐
iii. Environment & Disaster Management ☐	iv. Health ☐
v. Food ☐	vi. Water ☐
vii. Natural Resources ☐	viii. Transport & Logistics ☐
ix. Industry related ☐	x. Social Sciences ☐
xi. Policy Formulation ☐	

Specific field:

7. Main fields the activity is engaged in / focused on: *(check appropriate box/es and mention the exact field)*

i. Natural Sciences	☐
ii. Social Sciences	☐
Please specify the exact field/s	

8. Expected number of participants

From the host institution		From local institutes	
Foreign			

9. (i) Number of papers / abstracts expected to be presented:

(ii) Number of full papers that are planned to be published in indexed journals, stemming from the abstracts presented:

(iii) No. of full papers planned to be submitted to the Journal of the National Science Foundation, stemming from the abstracts presented:

10. Resource Persons / Invited Speakers

Name, affiliated institute, country	Gender (M/F/Other)	Topic / title of the lecture	Duration (hours/minutes)	Confirmed (yes/no)

PART III – FINANCIAL DETAILS (All fields are mandatory)

1. Estimated total budget of the activity: LKR.....

2. Support requested from the NSF Grant

■ indicates expenses that are **NOT** supported by NSF

Support requested	From Host Institution LKR		From Local Sources LKR (please specify source)		From Foreign Sources LKR (please specify source)		From NSF LKR
	Confirmed	Pending	Confirmed	Pending	Confirmed	Pending	
Income							
Registration fees of local participants	Amount x number of participants						■
Expected expenditure							
i. Audio – visual support							
ii. Printing Conference proceedings/Conference related publications							
Total (* please check whether the total adds up)							

PART IV – DECLARATION *(All fields are mandatory)***1. Specify previous SSSME grants awarded by the NSF during the last 5 years (2019-2014) to this organization, if applicable**

Year	Title	Name of the Applicant	NSF Support (LKR)

2. Please check each box relating to ALL following statements truthfully and confirm with your signature and rubber stamp.

I confirm that I am in agreement with the NSF policies and guidelines on the SSSME grant scheme*

☐

I confirm that, if the grant is awarded, the NSF Logo will be displayed on the website, the program and proceedings of the event*

☐

All proceedings/Abstracts/Full articles will be made visible via web with Open Access at the link given below *

☐

.....

I confirm that all above information given is true to the best of my knowledge *

☐

.....

Signature and Rubber Stamp of the Principal Organizer *

.....

Date *

(* mandatory)

3. Recommendation of the Head of organizing institution/university/professional scientific body

Institution:

I confirm that I have read the application and that the above given information is true to the best of my knowledge. The application is recommended and forwarded.

.....

Signature and Rubber Stamp of the Director/Head of the institution *

.....

Date *

University:

I confirm that I have read the application and that the above given information is true to the best of my knowledge. The application is recommended and forwarded.

.....

Signature and Rubber Stamp of the Vice Chancellor *

.....

Date *

Professional scientific body:

I confirm that I have read the application and that the above given information is true to the best of my knowledge. The application is recommended and forwarded.

.....

Signature and Rubber Stamp of the President *

.....

Date *

(* mandatory)