

Received Date(For Office Use): \_\_\_\_\_

## CO-CURRICULAR ACTIVITY / EVENT APPROVAL FORM

Registration Entity Number \_\_\_\_\_

Entity Type: ☐ Club ☐ Community ☐ Departmental Society ☐ Professional Society

Entity Name: \_\_\_\_\_

Event Name: \_\_\_\_\_

Organised by (Dept./Inst./Clus.): \_\_\_\_\_

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

Venue: \_\_\_\_\_

Time: \_\_\_\_\_

Coordinator Name: \_\_\_\_\_

Event Category: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Course Name: \_\_\_\_\_

Expected Participants: \_\_\_\_\_

SDG: \_\_\_\_\_

Program Code: \_\_\_\_\_

Event / Activity ID

(After CUIMS Punching) \_\_\_\_\_

**Event Type:**

**Competition**

☐ Online ☐ Offline ☐ Hybrid

☐ Internal ☐ National ☐ International

**A Brief Description of Event**

**Outcome of the Activity:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Required Documents

ALL APPROVAL MUST BE IN BETWEEN 27TH OF MONTH TO 3RD OF NEXT MONTH. AFTER OFFLINE APPROVAL, CUIMS PUNCHING WITHIN 7TH OF EVERY MONTH FOR ALL EVENTS IS MANDATORY AND SHOULD BE COMPLETED AS PER DELEGATION OF POWER.

*[If any documents is missing approval will not be processed] [Attach the below Annexure with this form]*

☐ Event Details ☐ Guest list & Profile ☐ Minute-2-Minute ☐ Budget summary ☐ Departmental Approved Budget Copy

### Office Bearer( As Applicable)

\_\_\_\_\_  
Faculty Advisor

\_\_\_\_\_  
Co-curricular Coordinator

\_\_\_\_\_  
HOD

\_\_\_\_\_  
PVC- Academic Affair  
[Associate/Assistant Dean]

### CU Academic Leader (As Applicable))

\_\_\_\_\_  
Associate Director /Director/Principal

\_\_\_\_\_  
Dean /Executive Director

### CU Management (As applicable)

\_\_\_\_\_  
Pro-Vice Chancellor  
Academic Affairs

\_\_\_\_\_  
Pro-Vice Chancellor

\_\_\_\_\_  
Vice Chancellor