

Conf. /Event Name:

Conf. /Event Venue:  Conf./Event Date:

(DD/MM/YY)

ASAR Paper ID.

Paper Title:

Author's Name

Gender: Male ☐ Female ☐

Pstal Address

Mobile

Email

Date of Birth:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year			

4. Nationality

AFFILIATION

*College/University/Company*

## ACADEMIC INFORMATION (\*)

Graduation  Post Graduation  PhD. /Post Doc

No of Conference/Events Attended  No of paper published

Books / Chapters published & E-learning materials Developed  Patents

Sponsored Projects (Number & Amount)

Awards and Recognition

## EXPERIENCE(\*) (IN YEARS)

Teaching experience	UG :	PG :
Research experience (Post-Ph.D.)		
Industrial experience		

## Guided by (\*)

Name  Affiliation

Designation  Email ID  Contact No.

**CO AUTHOR'S DETAILS (\*)****Co-author-1**

Name\_\_\_\_\_Affiliation\_\_\_\_\_

Designation\_\_\_\_\_Email ID\_\_\_\_\_Contact No.\_\_\_\_\_

**Co-author-2**

Name\_\_\_\_\_Affiliation\_\_\_\_\_

Designation\_\_\_\_\_Email ID\_\_\_\_\_Contact No.\_\_\_\_\_

**Co-author-3**

Name\_\_\_\_\_Affiliation\_\_\_\_\_

Designation\_\_\_\_\_Email ID\_\_\_\_\_Contact No.\_\_\_\_\_

**PAYMENT DEATAILS (\*)**

Amount Paid\_\_\_\_\_(USD/INR)Mode of transfer\_\_\_\_\_(Online Transfer/Cash deposit at Bank/NEFT)

Bank Details\_\_\_\_\_

Transactions ID\_\_\_\_\_Date of Transfer (DD/MM/YY)\_\_\_\_\_

*Note:(Mode of transfer: Online Banking/Cash deposit at bank /NEFT ) only***ADDITIONAL INFORMATION (\*)**

- ❖ Are you personally attending the Event\_\_\_\_\_(Y/N).
- ❖ No. of Persons attending the event with you?(Including your Co-authors)\_\_\_\_\_.
- ❖ Will your Guide/HOD/Principal attending will attend the Event?\_\_\_\_(Y/N)
- ❖ How do you get the information about this conference?
  - ☐Email ☐conferencealert.com ☐From College ☐News Paper ☐Referred by Friends ☐Referred by Professor
  - ☐Other Websites\_\_\_\_\_ (Specify)
- ❖ Have you attended any conference organized by ASAR or its allied group before?
  - ☐Yes (Paper ID\_\_\_\_\_)
  - ☐No

International Participants may give their arrival/ departure details to facilitate airport pickup **(On Extra Payment Only, Check the availability )**

	Date	Airline	Flight Number	Arrival/Departure Time	From/ To City
Arrival					
Departure					

**DECLARATION/UNDERTAKING(\*) (Read Carefully before Sign)****Declaration & Undertaking**

- I and my co-authors have not published this paper anywhere before and I am transferring the Copyright of my paper to ASAR to print in the Conference Proceeding and Journals decided by **Asian Society for Academic Research(ASAR)** Management which is a Registered Unit of PE Trust.
- I will not cause or be involved in any sort of violence or disturbance, within or outside of the Conference/Event Venue and during my travel to the venue in any Country during my Visa Period.
- ASAR has all rights reserved to shift the venue, rescheduling the date and timing of the Event at any time.
- In case of cancellation or re-scheduled of this event to other place or date at any time , ASAR will be not responsible for any kind of financial loss due to ticket cancellation or any other bookings done by me or my co-authors.
- I do hereby declare that all the information given by me is true and if at any moment it is found to be wrong, my registration for the event will be cancelled by ASAR and necessary action will be taken against me.
- ASAR is not responsible for any violation of Rules and Regulations by me or by my Co-authors of this paper at any country during or after the Event.
- The refund will be done if decided by ASAR management will be done as the same mode as I paid and will take 7 to 60 days from the day of refund process starts.
- I clearly understood the procedure for publication, registration and attending the seminar. I have read all the rules and regulations at <http://www.asar.org.in/rules.php> and above Declaration & Undertaking and I agree.

**SIGNATURE****Date:**\_\_\_\_\_

Author

Co-author-1

Co-author-2

Co-author-3

Co-author-4

**NOTE: Kindly send a scan copy of this form with the payment details to the Conference email id Only for registration Confirmation****Take the original hard copy for this form to the Event/Conference with a valid Identity card.****\* All rights reserved by ASAR**