|  |  |
| --- | --- |
| Name of the Student Chapter (SC) or Institute where SC is located |  |
| Faculty Mentor Name / Organizing Coordinator and Contact Details (Designation, Dept., Mobile and Email) |  |
| **Title of the Proposed Activity** |  |
| Brief Description (max. 300 words)[Identify specific themes on which the activity will focus and how it the activity would help the student community] |  |
| Tentative Topics and Resource persons along with duration of the sessions |  |
| Tentative breakup of the budget requested |  |
| Any other relevant points |  |