



## LITTLE FLOWER INSTITUTE OF SOCIAL SCIENCES AND HEALTH (LISSAH)

Affiliated to University of Calicut

26<sup>th</sup> Mile, Kaithapoyil, Kozhikode, Kerala – 673586

### *Request Letter for Financial Assistance*

Name of the Teacher :

Department :

Reason for seeking financial assistance:  Conference  Workshop  Membership Fee

Details of the event :

Date of the event :

Organising Institution :

Amount :

Date:

*Signature of the Applicant*

*-For Office Use Only-*

Following the request by \_\_\_\_\_

the management has been pleased to sanction an amount of \_\_\_\_\_ (in words)

\_\_\_\_\_ as financial assistance for conference/ workshop/ membership fee of professional bodies

\_\_\_\_\_  
*Accountant*

\_\_\_\_\_  
*Director/ Bursar*