

ASSOCIATION OF INDIAN UNIVERSITIES

86th ANNUAL MEETING

PROGRAMME

Venue	Cochin University of Science and Technology, Kochi	Date	December 15-16-17, 2011
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December 15, 2011 Thursday

10:00 – 12:00	Inaugural Function
12:00 - 13:00	Keynote address
13:00 to 14:00	Lunch
14:00 – 15:30	AIU National Seminar on Reforms and Innovation in Higher Education Towards World Class Standards
	<ul style="list-style-type: none"> • Resource Mobilisation and Institution of Higher Learning • Examination Reforms
15:30 – 15:45	Tea break
15:45 to 17:00	Interaction with the Heads of Apex Bodies
17:00 to 18:00	International Forum on Higher Education – Interaction with Foreign Delegates
19:00 to 20:00-	Kalaripayattu – Demonstration of Kerala’s Martial Art
20:00	Dinner

December 16, 2011 Friday

9:30 to 11:00 am	AIU National Seminar Continued
	<ul style="list-style-type: none"> • Quality in Higher Education at par with International Standards • University Education-Employability & Professionalism
11:00 to 11:30	Tea break
11:30 to 13:00	AIU National Seminar
	<ul style="list-style-type: none"> • Academic-Industry Interaction
13:00 to 14:00	Lunch
14:00 to 15:30	<ul style="list-style-type: none"> • Professional Education –Concepts And Innovations Drafting of Recommendations
16:30 to 18:00	Excursion
20:00	Dinner

December 17, 2011 Saturday

9:30 to 11:00	General Session
11:00 to 11:30	Tea Break
11:30 to 13:00	Business Session [For Members Only]
13:00-14:00	Valedictory Session
14:00	Lunch

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86th Annual Meeting

Travel Proforma

Venue: Cochin University of Science and Technology, Kochi

Date: December 15-17, 2011

Please send a copy of the travel proforma to:

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Nodal Officer,
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- 1 Name of the Member & University/Institute
Phone No.(O) (R)
FAX No.
E-mail
Mobile No.
- 2 Mode of Travel Air / Train / Road
- 3 Date of arrival at Kochi
Flight /Train No.
Date :
Time :
- 4 Date of departure from Kochi
Flight/Train No
Date
Time :
- 5 Whether accommodation required at Kochi? Yes No
- 6 Dietary restrictions, if any.
- 7 Whether accompanied with spouse? Yes No
- 8 Any other information/ assistance required.

Date:
Place

Signature of Member