

Mobile Number _____
Self Account No _____
IFSC Code No _____
Branch Name _____

CSK HIMACHAL PRADESH KRISHI VISHVA VIDYALAYA, PALAMPUR
“Office of the Dean, Postgraduate Studies”

Bill for Claiming CSKHPKV/JRF/Scholarship/Stipend/Financial Assistance

Ledger Page No _____
Voucher No _____

1. Name of SRF/JRF/ Scholarship/Stipend Holder _____
(In Block Letter)
2. Admission No _____ _Class, M.Sc./M.V.Sc./Ph.D)_____
3. Department _____
4. Period / Month _____ Rate _____ Amount _____
5. Sanction letter No. _____ Dated _____
 - i. Certified that the amount claimed in this bill will be utilized for the purpose it has been sanctioned and in accordance with the terms and conditions governing the award.
 - ii. It is also certified that I am not taking any financial assistance from any other Agency during the period stated above.
 - iii. The form must be submitted in this office on or before 10th of each month

Signature of the Claimant

CERTIFICATES

1. Certified that the work and conduct of the scholar has been found satisfactory during the period for which this claim has been made.
2. Certified that the scholarship holder has been regular in attendance and study.

**Signature of the Head of
Department with seal**

**Signature of Major Advisor
(Name in Block Letter)**

PRE-RECEIPT

Received a sum of Rs. _____ (Rupees _____
_____) only from the Dean, Postgraduate studies on account of my scholarship
/stipend

***Affix revenue stamp
(Rs. 5000/- or Above)**

**Signature of the Claimant
Name: _____
Admission No. _____**

FOR OFFICE USE ONLY

Sanctioned & Passed for Rs. _____ (Rupees _____
_____) on account of _____ For the
period w.e.f _____ under delegation of financial power
vested in him at Sr. No. 52.

UNDERTAKING

(For the purpose of award of scholarship/ stipends)

I _____ son/daughter of sh. _____

Admission No. _____ Student of _____

in the discipline of _____ Hearby give an Undertaking

that I am not in a receipt of any kind of financial assistance from a viz. Govt. of India/State

Govt./ Autonomous Bodies/ Public Sector Undertaking/ Private Undertaking/University/any

other agency for pursuing my studies at CSKHPKV, Palampur.

Major Advisor

Signature

Endst. No.

Dated:-

Head of the Department (With Seal)

