



हरियाणा केन्द्रीय विश्वविद्यालय CENTRAL UNIVERSITY OF HARYANA

(संसद अधिनियम 25 (2009) के तहत स्थापित)

(Established vide Act No. 25 (2009) of Parliament)

गांव: जांट-पाली, जिला-महेन्द्रगढ़ (हरियाणा) . 123029

Village: Jant-Pali, Distt: Mahendergarh (Haryana)-123029

Fellowship Claim Form for Scholars of Ph.D. and M.Phil.

1. Read the terms & conditions of the University/Grant Agency for the award thoroughly before filling up the fellowship claim form.

2. Enclosures (Please tick)

For new scholars only

- Proof of admission/registration in Ph.D./M.Phil. Course
- Fees payment Receipt (Attested by the Department)
- A self-attested copy of bank passbook/bank details

3. Form with incomplete details would not be considered.

Name of the Department: _____

Category of Fellowship: Non-NET/CSIR/ICSSR Etc.: _____

Name of the Scholar: _____

Enrollment No: _____

Date of Admission: _____

Name of the Course (Ph.D/M.Phil) _____

Category (UR/OBC/SC/ST etc.): _____

Mob No: _____ Email ID: _____

Period of Fellowship claimed: **From** _____ **To** _____

Period of Progress report: **From** _____ **To** _____

Total Amount Claimed: _____

Bank A/c No: _____ Name of the Bank _____

IFSC Code: _____

Enclosures (Please tick):

❖ **A copy of attendance record for the period of fellowship claimed.**

I hereby certify that-

1. I am registered scholar and I was present during fellowship claim period.
2. I am not in employment (either temporary or regular) and not drawing any kind of pay and allowance from any other source for the period for which the fellowship is claimed.
3. I am fully aware that in case of employment (either temporary or regular) and consequently drawing pay and allowances from any source, I am not eligible to draw the fellowship from the University.
4. I hereby undertake to refund the amount of fellowship received, in case it is found that I am not entitled for the same as per the University Rule.
5. To the best of my knowledge and belief, the particulars given in the form are correct.
6. I have already availed fellowship up to (Month & Year) _____

Signature of the Scholar

Date:

CERTIFICATE BY SUPERVISOR

Specific recommendations/remarks w.r.t. progress report of the Scholar(Satisfactory or Not Satisfactory): _____

1. It is certified that the particulars furnished above by the scholar are correct and the scholar is entitled to get the above mentioned scholarship for the period from _____ to _____.
2. It is certified that the attendance record has been verified for the above mentioned period.
3. It is certified that the scholar for whom HRA is claimed has not been provided any Hostel/Govt. accommodation.

**Signature of the Supervisor
(With Stamp and Date)**

Name of the Supervisor: _____

Designation: _____

**Signature of the HOD
(With Stamp and Date)**

Name of the HOD: _____

(For Office use only)

Finance Branch

Checked and passed for Rs. _____

In words: _____

Signature of dealing official

Date:

Checked by Section Officer/A.R./D.R.

Consultant Internal Audit (if Any)

Finance Officer

Registrar