

University of Delhi

(FELLOWSHIP BILL TO BE SUBMITTED BY THE SCHOLAR)

File No. _____ Department _____

Name of the Scholar _____

Scheme: CSIR / UGC-AAGS/ UGC. Fellowship: Non-Net _____

Date of Registration for Ph. D. / M. Phil. : _____

Date of submission for (Ph. D. / M. Phil. Thesis): _____

Date of Viva-Voce for (Ph. D. / M. Phil. Degree): _____

Bank Account No.: _____ IFSC: _____

Name and Full Address of Bank: _____

Nature of Grant	Month/Period of Fellowship	Rate	Total Amount in Rs.
Fellowship/Stipend			
HRA/Hostel Charges:	<u>Not Applicable</u>		

Total Amount: _____

Signature of the Scholar: _____

Certificate that the progress of the above scholar in studies/Research is good.

Signature: _____

Name of the Supervisor: _____

1. Certified that the particulars furnished above by the scholar are correct.
2. Certified that the attendance record has been verified for the above-mentioned period.
3. Certified that the scholar for whom HRA/Scholarship/Fellowship is claimed has not been provided any Hostel/Government.
4. Certified that the Viva-Voce for the Ph. D. Degree has not been conducted of the above-mentioned period of fellowship claimed.

❖ All fields are mandatory to fill.

Head of the Department
(with rubber stamp)

(TO BE FILLED BY FINANCE BRANCH-X)

O.C.R. Page No.: _____ Debit A/C.: _____

Checked and passed for Rs. _____

Rupees _____