



Central University of Gujarat

Sector-30, Gandhinagar 382 030

U. G. C. Rajiv Gandhi National Fellowship for SC/ST M. Phil/ Ph.D. Students

Claim Form/Contingency Form

F. No. _____ Voucher No.: _____ Month _____
Name of Student: _____

Registration No.: _____

Course Code: _____ Course Title: _____

Year of Admission: _____

Sanction Letter No & Date: _____

Valid From: _____ Valid Up to: _____

Claim Period: _____

(A) Rate of Fellowship: _____ Amount of Claim: ₹. _____

(Rupees _____ only)

(B) H. R. A. ₹. _____ (Rupees _____ only)

(C) Total Claim (A+B): ₹. _____ (Rupees _____ only)

Central Bank of India SB Account No.: _____ Branch Name: _____

I hereby undertake that-

1. I am not in employment, either temporary or regular, and not drawing any kind of pay and allowances from any source for the period for which the fellowship is claimed.
2. I am fully aware that in any 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.
3. I hereby undertake to refund the money received in case it is found that I am not entitled for the same as per the University.

Date: _____ Signature of Student _____

The above claim is recommended.

Signature
(Supervisor)

Signature
Dean of the School

The claim is admissible and passed for payment of ₹. _____ (Rupees.....only)

Dealing Assist.

Section Officer

OSD (F&A)

Received ₹..... (Rupeesonly)

Cheque No. _____ Dated: _____

Date: _____ Signature of Student _____