



डा बी आर अम्बेडकर राष्ट्रीय प्रौद्योगिकी संस्थान, जालन्धर  
Dr B R AMBEDKAR NATIONAL INSTITUTE OF TECHNOLOGY, JALANDHAR  
जी टी रोड बाई पास, जालन्धर-१४४०११, पंजाब (भारत)  
G T Road Bye Pass, Jalandhar-144011, Punjab (India)  
(An Institute of National Importance)

Ref.No.....

Date.....

**REQUISITION FOR UTILIZATION OF RESEARCH FUND FOR PhD SCHOLARS/PG STUDENTS**

1.	Name	
2.	Roll No	
3.	Department	
4.	Date of Admission	
5.	Programme (PhD/M Tech/MSc)	
6.	<b>NATURE OF EXPENDITURE</b>	
	(a) Registration fee/TA and DA for Conferences/Testing of Materials	(b) Description of consumable items to be procured and their approx. cost (If requisition is for Portable hard Disc/Pen Drive/Stationery, details of purchases shall be verified by Department Office)
7.	Whether any advance is required. If Yes, Please mention the amount	
8.	Email & Mobile No.	
9.	Details of Bank	Name of Bank _____ Account No. _____ IFSC Code _____

Signature of Research Scholar

10. Recommended as per institute norms and it is certified that guidelines on the issue have been followed.

**Supervisor**

**Head of Department**

**Superintendent (Accounts)**

**Registrar**



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G T Road Bye Pass, Jalandhar-144011, Punjab (India)  
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**Monthly Progress Report of PhD Students**

1. Name of the Student : \_\_\_\_\_
2. Roll No. : \_\_\_\_\_
3. Department : \_\_\_\_\_
4. Period : (a) From \_\_\_\_\_ To \_\_\_\_\_  
(b) Month and year \_\_\_\_\_
5. Whether NET/GATE qualified : \_\_\_\_\_

**6. WORK LOAD ALLOTTED \_\_\_\_\_ HOURS**

Subject (a)	Name of the Faculty Member (b)	Report of the Faculty Member (c)

7. Email \_\_\_\_\_ Mobile No. \_\_\_\_\_
8. Name of Bank \_\_\_\_\_ Account No. \_\_\_\_\_ IFSC Code \_\_\_\_\_

**Signature of the Student**

**9. THESIS/SPECIAL PROBLEM/SEMINAR PROGRESS**

- a. Topic of the thesis/seminar/special problem : \_\_\_\_\_
- b. Name of the Supervisor : \_\_\_\_\_
- c. Progress : \_\_\_\_\_

**10. FOR OFFICE USE**

- Leave Record of the RS : (a) Total Leave available : **15 Per Semester**  
(b) Leave availed : \_\_\_\_\_  
(c) Balance available : \_\_\_\_\_  
(d) Without stipend after availing 15 leave : \_\_\_\_\_

11. Entered in the Register Page No.....S. No .....

**Signature of the Supervisor**

**Signature of HOD**

**Coordinator (PG Scholarships)**

**Registrar**

**Encl: Copy of Attendance Report duly verified by the HOD.**



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Date.....

**Research Fund Adjustment Form for Research Scholars/M Tech Students**

1. Name : \_\_\_\_\_
2. Roll No : \_\_\_\_\_
3. Department : \_\_\_\_\_
4. Programme : \_\_\_\_\_
5. Admission Date : \_\_\_\_\_
6. Sanctioned Amount : \_\_\_\_\_

(Please attach the sanction letter)

7. Advance drawn (If any): \_\_\_\_\_

S.No.	Particulars	Cash Memo/Bill/Ticket No.	Date	Amount	Remarks
I					
II					
III					
IV					
V					
VI					
VII					
VIII					
IX					
X					
<b>TOTAL</b>					

8. Email \_\_\_\_\_ Mobile No. \_\_\_\_\_

9. Name of Bank \_\_\_\_\_ Account No. \_\_\_\_\_ IFSC Code \_\_\_\_\_

10. Certified that the amount has been utilized for the purpose, it was sanctioned/authorized.

Date: \_\_\_\_\_

Signature of Research Scholar \_\_\_\_\_

Certified that the contingency amount has been utilized for the purpose it was sanctioned/authorized. The details are verified and the amount claimed may be reimbursed. Guidelines on the issue have been followed.

Signature of Supervisor \_\_\_\_\_

Head of Department \_\_\_\_\_

Superintendent (Accounts)

Registrar



Ref.No.....

Date.....

**MONTHLY PROGRESS REPORT OF M TECH STUDENTS**

1. Name of the student ..... Roll No: ..... Department.....
2. Son/ Daughter of Sh. .... Semester .....
3. Mobile ..... E-mail.....
4. Period from ..... to ..... Month and Year .....

**5. Class Work Performance**

S.No	Subject	ATTENDANCE OF LECTURES			Signature of the Teacher
		Delivered	Attended	Percent Attendance	
I					
II					
III					
IV					
V					
VI					

**6. Work Load Allotted ..... hours**

Subject (a)	Name of the faculty Member (b)	Report of the faculty member (c)

7. Name of Bank..... Account No..... IFSC Code.....

(Signature of the student)

**8. Thesis/ Special Problem/ Seminar progress**

Name of the supervisor..... Progress .....

(Signature of Supervisor)

**9. For office Use only**

Leave Record of the RS

(a) Total Leave available	<b>:15 Per Semester</b>
(b) Leave availed	: _____
(c) Balance available	: _____
(d) Without stipend after availing 15 leave	: _____

11. Entered in the Register Page No..... ..Sr. No .....

12. Remarks of the M Tech Coordinator.....

(Signature of M.Tech Coordinator)

(Signature of HOD)

**Coordinator (PG Scholarships)**

**Superintendent (Accounts)**

**Encl: Copy of Attendance Report duly verified by the HOD.**