



शोध निदेशालय, नेहरु केन्द्र
Directorate of Research, Nehru Kendra
महात्मा ज्योतिबा फुले रोहिलखण्ड विश्वविद्यालय, बरेली
MAHATMA JYOTIBA PHULE ROHILKHAND UNIVERSITY, BAREILLY

Proforma :Claim form for Conducting Pre-Ph.D. Course Work

Date :

To,
The Director
Directorate of Research (DoR)
MJP Rohilkhand University Bareilly (243006)

This is to certify that all the expenditure is genuine related to Pre-Ph.D. course work
(Subject.....) in best of my knowledge.

Details expenditure as follows.

(A) Co-ordinator	Amount	Bill Number /Page Number

(B) Class-III	Amount	Bill Number /Page Number

(C) Class- IV	Amount	Bill Number /Page Number

(D) Paper –I

Total Number of Lectures	Name of the Speakers/Affiliation/Designation	Amount

(E) Paper-II

Total Number of Lectures	Name of the Speakers/Affiliation/Designation	Amount

(F) Contingency Grant	Amount	Bill Number /Page Number

Grand Total	Amount	Total Number of Bills
A+B+C+D+E+F=		

List of Enclosures:

Signature:

Co-ordinator Name :

Subject :

College Name:

Telephone Number :

E-Mail :

(Note: Kindly attach Certified remuneration/bill)