Student Activities Committee (SAC)

Reimbursement Form for Student Activities

	Kindly Tick
Moot Court	
Debate	
ADR	
Seminar	
Others	
Event Name:	
Venue:	
Date:	
Status of the participation - Winner/Runner Up/Semi Finalist/Quarter Finalist/Participation only	

Details of Participants

Sr. No.	Name of student	Roll No.	Batch	Semester	Division
1					
2					
3					
4					
5					
6					
7					

CHECKLIST OF DOCUMENTS SUBMISSION*

Sr. No.	Documents	YES	NO	If NO, then pl. state the reason	For Office (verified)
1	Whether Letter of Approval (LOA) approved by HOI				
2	Whether duly signed Event Report submitted				
3	Whether Trophy/ies(if any) submitted				
4	Whether registration fee receipt submitted.				
5	Whether copy of travel tickets submitted				
6	Whether copy of accommodation receipt submitted .(If applicable)				
7	Whether receipt of photocopy submitted. (If applicable)				
8	Whether a copy of Certificate of Winner/Runner up/Semi Finalist/Quarter Finalist/Participation is submitted.				
9	Whether copy of cancelled cheqe submittted.				
10	Whether Bank Statement provided as payment proof				

DETAILS OF EXPENDITURE						
Sr. No.	**Particulars (Head)**	**Whether claiming (Yes/No)**	**Whether Original doc/receipt submitted (Yes/No)**	**Actual Expenses**	**Eligible Amount**	**Approved Amount (____ %)**
1	**Registration Fee**					
2	**Travel Expenses (Train/Bus)****					
3	**Accommodation Expenses(If any) *****					
4	**Photocopy Expenses(self attested)**					
5	Any Other (Specify) (Subject to approval of HoI)					
	Total Amount (Rs.)					
*	**Any claim without supporting documents/receipts, will not be accepted and considered for reimbursement.**					
**	**Only Train(3AC)/Bus travel is eligible for reimbursement. If travelled in any other mode including flight, then pl. calculate the claim as per the eligible mode and submit along with copy of the proof of calculation of eligible fare(copy of the 3AC fare details)**					
***	**If accommodation is provided by the organizers, please furnish details**					
****	**Take Printout of Form on both side and submit within 07 working days after completion of the competition**					

Name of Student/s to whom the Cheque/DD/NEFT should be issued/made: (In Block Letters)*	

*** Note: A copy of the cancelled cheque of the student should be attached along with the application form**

Declaration: I/We hereby declare that the details furnished above are true and correct to the best of my knowledge and belief. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it and will not be eligible to get reimbursement.

Sr. No.	**Name**	**Signature of Participants**
1		
2		
3		
4		
5		
6		
7		

Final Approved Amount

Checked by **Faculty Coordinator Name** **Signature**

Verified by **Account Section - ILNU Student Activities**

Faculty Advisor-Student Activities Committee