



BVB College Campus, Hubballi-580031

TRAVEL ALLOWANCE / DAILY ALLOWANCE (TA/DA) CLAIM FORM

- Personal Information

Name of Staff : Shreya Hiremath
Designation : Assistant Professor
Department : Computer Science and Engineering(AI)
Employee ID : 10772
Contact Number : 8088442386

- Travel Details

Purpose of Travel : Attending and presenting paper in Conference
"INtelligent Systems for Pioneering Innovation in Robotics
and Electric Mobility ([INSPIRE HYPERLINK](https://miteconference.org/)

"<https://miteconference.org/>") HYPERLINK "<https://miteconference.org/>" – 2025"

Mode of Travel : Bus

Date of Travel : From : Hubballi (20-11-25) To : Moodabidri (21-11-25)

Destination : Moodabidri

- Expense Details

- Travel Allowance (TA)

| Date | Place of Journey | | Mode of Transport | Time | | If Travelled by own vehicle | | Total (₹) |
|------------|------------------|------------|-------------------|----------|------------------|-----------------------------|-----------------|-----------|
| | From | To | | Start | End | Distance (Km) | Rate per km (₹) | |
| 20-11-2025 | Hubballi | Moodabidri | Bus | 10.30 pm | 7.00 am 21-11-25 | -- | -- | 800 |
| 21-11-2025 | Moodabidri | Hubballi | Bus | 8.00 pm | 5.00 am 22/11/25 | -- | -- | 977 |

- Local Conveyance

| Date | From | To | Mode of Transport | Time | | If Travelled by own vehicle or in case valid bills are not available | | Total (₹) |
|------|------|----|-------------------|-------|-----|--|------|-----------|
| | | | | Start | End | Distance | Rate | |

| | | | | | | | | |
|------------|--|--|------|---------|---------|------|------------------|-----|
| | | | | | | (km) | per km (₹) | |
| 21-11-2025 | Moodabidri | Mangalore Institute of Technology & Engineering (MITE) | Auto | 8.30 am | 9.00 am | --- | --- | 300 |
| 30-6-25 | Mangalore Institute of Technology & Engineering (MITE) | Moodabidri | Auto | 6.00 pm | 6.30 am | --- | --- | |

- Food Allowance**

| Date | No of Days | Time | | Total time (in hrs.) | Total (₹) |
|------------|------------|-------|-----|-------------------------|-----------|
| | | Start | End | | |
| 21-11-2025 | 1 | --- | --- | --- | 400 |
| | | | | | |

- Hotel Accommodation**

| Place of Stay | Check in | | Check out | | No of Days | Total (₹) |
|---------------|----------|------|-----------|------|------------|-----------|
| | Date | Time | Date | Time | | |
| | | | | | | |

- Registration Fees (If Applicable)**

| Date | Description | Amount (₹) |
|----------------------|---------------------------|------------|
| 20-11-25 to 21-11-25 | Amount yet to be received | 6900 |

- Total Summary of Expenses**

| Sl. | Particulars | Amount (₹) |
|-----|--------------------------------|------------|
| A | Travel Expenses | 1777 |
| B | Conveyance Expenses | 300 |
| C | Food Allowance | 400 |
| D | Hotel Accommodation | --- |
| E | Registration Fees | 6900 |
| F | Total [F=A+B+C+D+E] | 9377 |
| G | Advance Taken if any | 0 |
| H | Net Refundable [H= F-G] | 9377 |

- Attachments**

- Original Tickets
- Boarding Pass (if Applicable)
- Hotel/Lodge Bills
- Local conveyance bills
- Payment Receipt of Registration Fees

- along with Certificate of attendance
 - Permission Letter
 - Payment Screenshot photocopy for online payments
 - Any other Supporting documents
- **Bank Details of the employee**
Name of the Bank : Canara Bank Account Holder Name : Asst Prof.Shreya Hiremath
Account Number : 110265862002 IFSC Code : CNRB0011244

Declaration :

I hereby declare that the above details are true and correct to the best of my knowledge. I have attached all necessary bills and documents as proof of expenses.

Date : 29-11-25

Signature of Staff

Approved By

**HoD/Director
Signature & Date**

**Registrar
Signature & Date**