

BITS, PILANI- K. K. BIRLA GOA CAMPUS
Application for Advance

Date: _____

1. Name : _____

2. PSRN : _____

3. Designation : _____

4. Department/Unit _____

5. Amount Requested:(in figure)Rs. _____

(in words)Rupees _____

6. Purpose : Tick (☐) appropriate item and give details below:

☐ Purchase ☐ Repair ☐ TA/DA ☐ LTC

☐ Others (Specify) _____

7. Position on previous advances: Tick (☐) appropriate item:

☐ Not applicable (All previous advances cleared/ None taken)

☐ Account submitted on _____

(Advanced Rs. _____; Amount spent Rs. _____)

☐ Advance of Rs. _____ taken on _____. Yet to be accounted for.

Account of the advance now requested will be submitted within a week after completion of the task. Expected date of completion of the task is _____.

Signature of the Applicant

Forwarded and recommended

Faculty In-charge / Head of Department

NOTE: Any balance of advance left after completion of the task for which advance was taken has to be immediately deposited back in the institute.

The application is found in order and advance may permitted from account of _____

Sr. Office Superintendent

Finance Officer

Please pay advance of Rs. _____ (Rupees _____)

Deputy Registrar

Date: _____

For use in Accounts Office