



St. Joseph University

Virgin Town, Ikishe Model Village, Chumoukedima, Nagaland, India - 797115

Private University Established Under Nagaland Govt. Act No.6 of 2016

Recognized by University Grants Commission (UGC)



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TA, DA, HONORARIUM AND REMUNERATION CLAIM FORM (RE01)

Name of the Claimant : _____

Designation : _____ Department : _____

Affiliation : _____

Phone No. : _____ E-Mail Id. : _____

Details of the Event: _____

Purpose of Claim / Nature of Duty: (Tick the Appropriate Category)

☐ External Examiner ☐ Internal Examiner ☐ Paper Valuation ☐ DC Meeting ☐ Public Viva Voce

☐ Guest Lecturer ☐ Special Guest ☐ Hall Invigilator ☐ Question Paper Setting

☐ Others, Specify : _____

Details of Claim

| Sl.No. | Description | Amount in Rs. |
|--------------|---|---------------|
| 1 | Travelling Allowance : Date of Travel : Mode of Travel : Air / Train / Bus / Taxi | |
| 2 | DA No. of Days: _____ x Amount per Day in Rs. _____ Incidental Charges (If any) in Rs. _____ | |
| 3 | Honorarium | |
| 4 | Remuneration Details : | |
| 5 | Any other Expenditure , Please Specify : | |
| Total Amount | | |

Bank Details of the Claimant

Account No. _____ Bank Name : _____ IFSC Code _____

Bank Address _____

Date :

Signature of the Claimant

OFFICE USE ONLY

Verified By

Paid from University / Self Supported

Approved By