INDIAN INSTITUTE OF TECHNOLOGY, ROORKEE FINANCE & ACCOUNTS OFFICE

PERFORMA FOR REIMBURSEMENT UNDER PROFESSIONAL DEVELOPMENT ALLOWANCE (PDA) (Ref: 1. Notification No. E.S(A)/12246/E-4759 dated 20th April, 2022} Name: _____ Emp. No. ____ Designation. ____ Deptt: _____ SI. No. Contingency Tick Conferences Tick Academic/research books/e-books 1 National Conference 2 Memberships of professional societies International Conference 3 Software/Cloud storage/Computer peripherals/Laboratory consumables/Laboratory usage charges Publication charges/ Journal over-length page charges/ 4 Journal subscription charges/purchase of journal article Research Assistant/Associate for a maximum of 3 months 5 Reimbursement claim for the block (.....to.....to......) with following details:-SI. Particulars Date of Receipt Amount Rs. No. Total Rs. Rupees. I give an undertaking that if my expenditure exceed grant allocated, I shall be liable to payback the excess expenditure to the Institute, in case I fail to do so, Institute has the right to recover the excess expenditure out of thepayment due to me in any of the accounts, through Head of the parent Department/Centre.

1.	Separate Form to be filled for conference and T.A. Bill Performa be
	used as annexure for details.

2.	Please send	this	performa	along	with	original	verified	vouchers	and
	receipts to Fi	inand	re & Accou	ints Of	fice.				

Signature:
Name
Emp. No

For the use of the Office of Head of Department

Entry has been made in the Deptt. P.D.A. register at Page No.:

Verfied & passed for payment for:

	Contigency	Rs.	OH36-46-200-412
	National Conference	Rs.	OH36-46-200-409
ĺ	International Conference	Rs.	OH36-46-200-410
l	Total Rs.		

Head of Department (Seal)