



राष्ट्रीय प्रौद्योगिकी संस्थान अगर्तला  
NATIONAL INSTITUTE OF TECHNOLOGY AGARTALA  
OFFICE OF THE DEAN ACADEMIC  
[nitadeanacademic@gmail.com](mailto:nitadeanacademic@gmail.com)

F.No.NITA.5/(20-Acad)/Ph.D Scholarship/2023-24/A-1503

Dated:- 12/03/2024

**NOTICE**

All the concerned Ph.D scholars (including passed out scholars and scholars submitted thesis), under MoE Scholarship, are instructed to submit their claim of arrear on the revised scholarship rate, **in the prescribed format to their concerned Department on or before 19/03/2024.**

As per the notice vide F.No.NITA.5/(20-Acad)/Ph.D Scholarship/2023-24/10281-85 dated 11/03/2024, such claim is applicable from 01/01/2023 to February 2024 or the date of clearance from the Accounts section in Ph. D from no. 17, whichever is earlier.

Scholars failing to apply within the above mentioned date may not be allowed to apply within six months.

This is issued with the approval of the Competent Authority.

4  
Dy. Registrar (Academic Affairs)

Copy to:

1. PS to the Director, NIT Agartala, for kind information of the Director.
2. Dean (AA) for kind information.
3. The Registrar, NIT Agartala, for kind information.
4. All Heads of the Departments, for kind information and necessary action, **with a request to submit a consolidated list (student wise monthly) with the claim amount to the office of the Dean (AA) by 21/03/2024.**
5. Faculty in-charge MIS for kind information and necessary action.
6. DR (F&A) for information and necessary action.
7. ARs of Academic Section, for information and necessary action.
8. System administrator with a request to upload in the Institute website.

Anindam M. B.  
Dy. Registrar (Academic Affairs) 12/03/2024





# NATIONAL INSTITUTE OF TECHNOLOGY, AGARTALA

## DUE DRAWN FORM FOR CLAIMING ARREAR of MoE SCHOLARSHIP

1. To be filled by the Scholar:

Name of the Student (BLOCK LETTER)	
Enrollment Number	
Department	
Supervisor(s) Name	
Date of admission (as per MIS)	
Date of Synopsis seminar (if applicable)	
Date of Clearance from Account Section (if thesis submitted/ degree awarded)	
Period of Scholarship	From _____ To _____
Bank Name and Branch	
Bank A/c No	

2. Due- drawn amount

Month	Due amt.	Drawn amt.	Arrear claim
Jan'23			
Feb'23			
Mar'23			
Apr'23			
May'23			
June'23			
July'23			

Month	Due amt.	Drawn amt.	Arrear claim
Aug'23			
Sept'23			
Oct'23			
Nov'23			
Dec'23			
Jan'24			
Feb'24			

\*Write NIL whichever month is not applicable

Total arrear claimed: \_\_\_\_\_ (In words \_\_\_\_\_)

### Declaration by the applicant:

I hereby declare that the information given by me in this form is true and correct. I also undertake that if any information is found incorrect/ false at any point of time, I shall return the amount and any action taken by NIT Agartala will be final.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of the candidate)

### Recommendation:

The amount Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_ only) may be paid to the applicant as arrear for the period from \_\_\_\_\_ to \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Academic Coordinate/Supervisor)

Full Name:

Designation:

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of HOD)

To  
Assistant Registrar (Finance)