

UNIVERSITY GRANTS COMMISSION
BAHADURSHAH ZAFAR MARG
NEW DELHI - 110002
BSR Section

CERTIFICATE III

COCHIN UNIVERSITY OF SCIENCE AND TECHNOLOGY
NAME OF THE DEPARTMENT :

***FORM FOR SUBMITTING ACCOUNTS OF CONTINGENCY GRANTS AND
THE UTILISATION CERTIFICATE***

1. Name of BSR Fellow:
2. Award letter number and date:
3. Name of the scheme under which he/she is working:
4. Period to which the accounts of contingency grant relates:
5. Expenditure

From: to.....

Amount Dated

A - Books and allied items:

B- Typing (tracing and ammonia printing):

C- Stationery:

D- Postage

E- Chemical and electrical goods:

F- Travel/fieldwork:

Total :(A to F)

1- Period for which the contingency grant is payable:

Certified that the expenditure of Rs.(Rupees.....) out of the contingency grant

of Rs.(Rupees.....)sanctioned vide Commission letter number

F..... Dated..... In respect of.....(name of the fellow) has been utilized for the purpose for which it was sanctioned in accordance with the terms and conditions lay down by the University Grants Commission.

If, as a result of check or audit objection, some irregularity is noticed at a later stage, action will be taken to refund, adjust or regularize the objected amount.

Signature
Name
Date
**Name of
the Candidate**

Signature
Name
Date
**Head of Deptt.
(Seal)**

Signature
Name
Date
**Registrar
(Seal of University)**

N.B.: For any correspondence in this regard, the Commission's letter number and date may please be quoted without fail.

