

NATIONAL INSTITUTE OF TECHNOLOGY ROURKELA

FU)RM – ES / 02	APP	LICATIO	N F	OR SANCTION O	r cash	ADVANCE "			
No. – NITR/							Date – /.	/20		
Name - Dr./Mr./Ms.				Emp. Code-						
Department – Designation –			_		Gr. Pay – ₹					
_										
1.	Budget ID of Accou		-	PE.	/ NE					
2.	Purpose of Advance (* In case of advance for Co	<u>03</u> , for	other official tours use <u>Fc</u>	orm – ES / 04	, for LTC use <u>Form -</u>	<u>- ES / 07</u> .)				
3.	Estimate of Expenditure		-				- ₹			
							- ₹			
							- ₹			
							- ₹			
				TO	TAL ESTIMATE		- ₹			
4.	Amount of Advance	e requested	-	₹						
5.	Mode of receipt requested		-		Transfer to Salary A/c		A/c Payee Cheque		μe	
6.	Status of previous	advance, if any	-		Adjusted	Bill sub	omitted	Pend	ling	
7.	Reason for pending	g advance	-							
I undertake to spend the advance only for the purpose mentioned above and submit the Adjustment Bill and/or settle the advance within 15 days of receipt.										
						Si	gnature of th	e Emplo	yee	
Approved / Recommended ** for ₹ (From the A/c No. mentioned at item 1, above.)					Appro	oved as r	recommended	l.		
HOD / HOC / PIC					Dean() / Director					
Amount may please be entered in the Advance Register, and paid/transferred as approved above.					Entered at Page	No	, SI. No)		
Asst./Dy. Registrar (FA)					Accountant		Super	intenden	 it	
Paid / Transferred by Cheque No					Received Adva					
DA (Cheque) Superintendent			ndent		Signature of the Receiver					

^{**} IMPORTANT – Please forward to F&A Office if approved, or directly forward this Form to the competent authority if recommended for approval