



INDIRA GANDHI NATIONAL TRIBAL UNIVERSITY, AMARKANTAK (M.P.)

GENERAL ADVANCE REQUEST FORM

1	Name of the Applicant				
2	Designation				
3	Department				
4	(i) Bank Account No		(ii) Bank Name		
	(iii) Branch Address		(iv) IFS Code		
5	Source of advance (Please tick)	University() / Project () / Others ()			
		(Please specify other source / Project details if applicable)			
6	Purpose of advance with estimate of expenditure (separate sheet may be attached, if required)				
7a	Proposed date of completion of activity		7b. Amount of advance required (Rs)		
9	Details of any previous advance which has not been settled	Date of advance	Purpose of Advance	Cheque No.	Amount (Rs)
		Reason for delay in settlement:			
10	I declare /certify that: 1. the advance is urgently required for proper functioning of the Department/ work and required material is not available in Store/ Purchase. 2. above mentioned details are true and correct to the best of my knowledge and belief; 3. to follow the purchase rules/ procedure of GFR-2016 and settle the advance within 15 days from the release of advance in prescribed format with all original bills/delivery challans, invoices/cash memos and vouchers duly signed and verified. 4. I will not pay more than Rs 5,000/- to any person in cash in any one day. <p style="text-align: right;">Signature of the Applicant</p>				
11	Signature of Recommending Authority				
12	Approval by the Competent Authority having financial power to sanction & release advance				
Forwarded to Finance & Account Section for release of Advance					
DA/ SO		AR/DR		Finance Officer	