



தமிழ்நாடு திறந்தநிலைப் பல்கலைக்கழகம்
TAMIL NADU OPEN UNIVERSITY

CLAIM FORM FOR UNIVERSITY RESEARCH FELLOWSHIP [URF]

Name of the Scholar :
Enrolment Number :
Name of the Department / Subject :
Name of the School :
Month & Year of Joining in the University :
Fellowship Award Letter No. & Date :
Period for which the Fellowship/
Contingency is claimed : From to
Fellowship per month : Rs.5000/-
Annual Contingency : Rs.5000/- (once in a year)

Bank Details:

Name of the A/c. holder :
Account No :
Type of Account :
Name of the Bank :
Name of the Branch :
IFSC Code :

Date:

Signature of the Research Scholar

It is certified that the research progress/attendance of the Research Scholar is satisfactory. The fellowship claims made by the Scholar is checked and found correct. It is recommended to make the payment.

Signature of the Research Supervisor

Signature of the Head of the School

[Note: This claim form is to be submitted to the Finance Division, TNOU]