

NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM TA / DA CLAIM FORM FOR STUDENT

1. Name	of Stude	nt	:								
2. Class i	in which	Admitted									
3. Enroli	ment No.		:								
4. Purpo	se of Jou	rney	:								
_	No. & Da	-	:								
Departure		Arrival		From		То	Distance		le of	Fare (₹.)	Remarks
		Date Time					jou		ney	1 1 (1)	(Ticket No.)
Date	Time	Date	Time								
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Date		Breakfast		Lunch		Dinner			Total (₹.)		
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	on Number										
Registiati											
Check I		In		Check Out			Number of Days		S Amount (₹.)		
							(C) T	OTAL	!		
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										c. \	
1. Free B	oarding Pi	rovided:	YES / NO	2. F	ree L	odging P	rovided: Y	ES / N	0		
Date:								Rec	eived	₹	
S	ignature o	of the Stud	lent			Н	lead / Super	visor	/Dean	(SW) / Facu	ıltv I/C
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A/c Head											
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	& found co		amount O				may be paiu				
Superintendent				Accountant					Deputy Registrar		

Registrar Director