**To,**

**Head**

**DESE**

# INDIAN INSTITUTE OF TECHNOLOGY BOMBAY

# DEPT OF ENERGY SCIENCE AND ENGG

FORM FOR SETTLEMENT/REIMBURSEMENT OF EXPENSES

(To be submitted in Dept office within ONE MONTH of Conference Travel.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of the Student : Roll No:** | | | | | |
| **Name of the Conference/symposium with dates:** | | | | | |
| **[1] Expenditure Details :** | | **Amount (in Foreign currency)** | **Amount (INR)** | **For Accounts Calculation** | **Check List** |
| **Sr. No.** | **Travel/Registration etc. (1)** |  |  |  |  |
| **1** | **Air Fare / Train Fare(Attached Invoice/ Bill with payment proof and original Boarding Pass)** |  |  |  |  |
| **2** | **Registration Fees (original receipts with payment proof)** |  |  |  |  |
| **3** | **Travel Insurance** |  |  |  |  |
| **4** | **Visa Fees (original receipts)** |  |  |  |  |
| **5** | **Poster Printing** |  |  |  |  |
| **6** | **Local Transport (In Mumbai)** |  |  |  |  |
| **Total (1)** | |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1.** | **Hotel Rent (2)**  **(Original receipts with payment proof/ online payment proof)** | **Amount (in Foreign currency)** | **Amount (INR)** | **For Accounts Calculation** | **Check List** |
|  | **Check In Date :** |  |  |  |  |
| **Check Out Date:** |  |  |  |  |
| **Total (2)** | |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2.** | **Food Bills (3)**  **(Original receipts with payment proof/ online payment proof)** | **Amount (in Foreign currency)** | **Amount (INR)** | **For Accounts Calculation** | **Check List** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **Total (3)** | |  |  |  |  |
| **3.** | **Travel (Abroad/Local for conference) (4)**  **(Original receipts with payment proof/ online payment proof)** | **Amount (in Foreign currency)** | **Amount (INR)** | **For Accounts Calculation** | **Check List** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **Total (4)** | |  |  |  |  |
| **Grand Total (1+2+3+4)** | |  |  |  |  |

Total Amount for Reimbursement or Settlement: Rs. -------------------

(1+2+3+4)

Less: Advance Taken : Rs. -------------------

Net Amount for Reimbursement or Settlement : Rs. -------------------

No. of Enclosures : -------------------

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Note for Students:

* **Please attach proof of exchange rate as on the first day of conference.**
* **Attach original hotel bills, registration receipt, airfare receipt, along with the boarding passes and food/ local travel (abroad) bills/ receipts for settlement of the advance. If the bills/ receipts are printed on thermal paper, photocopy of the bills/ receipts should also be attached along with the originals.**
* **Please attach proof of payment (Bank or credit/ Debit card statement)**
* **Student is eligible for Actual DA or Admissible DA, whichever is less.**
* **Students are requested to submit Settlement bills in order of Expenditure details mentioned above.**

**\*Attach local conveyance form for local travel**

**\*Attach Participation certificate**

\_ Student Signature with date

E-mail ID: \_ Mobile No.: \_ Certified that the student attended the conference for which settlement/reimbursement is claimed

(Prof. ) ( Prof. ) Guide Name and Signature HOD signature