

HRA CERTIFICATE

CERTIFICATE NO. 1

Certified that Mr./Ms. is paying house rent of Rs. and is eligible to draw House Rent Allowance @ Rs. as per University rules w.e.f.....

Registrar/Director/Principal

OR

CERTIFICATE NO. 2

Certified that Mr./Ms. is staying independently and, therefore, is eligible to draw House Rent Allowance @ Rs. minimum admissible to a lecturer as per University rules.

Registrar/Director/Principal

OR

CERTIFICATE NO. 3

Certified that Mr./Ms..... Has been provided accommodation in the hostel. But he/she could not be provided with single seated flat type accommodation as recommended by the Commission. Hostel fee @ Rs. per month w.e.f. is being charged from him/her.

Registrar/Director/Principal

If, as a result of check or audit objection, some irregularity is noticed at later stage, action will be taken to refund, adjust or regularize the objected amount.

**Signature
Name
Date
Name of candidate**

**Signature
Name
Date
Head of Deptt.
(Seal)**

**Signature
Name
Date
Registrar/Director/Principal
(Seal of Univ./Institution/College)**

N.B. For any correspondence in this regard, the Commission's letter number and date may please be quoted without fail.

ANNEXURE- VII

THREE MEMBERS ASSESSMENT COMMITTEE REPORT FOR UPGRADATION FROM JRF TO SRF UNDER THE SCHEME OF JRF IN SCIENCE, HUMANITIES & SOCIAL SCIENCES

Assessment for Upgradation of Mr./Mrs. _____ JRF working at the Department of _____ of University/Institution/College _____ on completion of twoyears on date _____

CONSTITUTION OF THE COMMITTEE

(Name and designation)

1. [**1 Outside Subject Expert- other than same Univ./Instt./College**]

2. [**Supervisor of Research Scholar**]

3. [**Head of the Department**]

Date of joining:

Ph.D. registration No.:

Date of meeting:

Time:

VENUE OF ASSESSMENT/INTERVIEW:

ASSESSMENT OF THE COMMITTEE

The Committee assessed the progress of the candidate through their presentation followed by interview and recommended as follows.

RECOMMENDATIONS

(Strike out whichever is not applicable)

In view of the outstanding / very good /satisfactory performance of the JRF, and also the fact that he/she has published work to his/her credit, the committee recommends that Mr./Mrs./Ms. _____ may be upgraded or not upgraded from JRF to SRF.

**Signature
Name
Date
Name of the Supervisor
(Seal)**

**Signature
Name
Date
Head of Department
(Seal)**

**Signature
Name
Date
Registrar/ Director /Principal
(Seal of University/Institution/College)**