Ch.Devi Lal State Institute of Engineering & Technology, Panniwala Mota(Sirsa)

No.CDLSIET/2022/5%

Dated: 63-64-11-24

Notice/Circular

All SC students except hostelers, who have availing bus pass facility are directed to fill the form for reimbursement of Bus/train charges up to 08/02/22 in Library(Dealing Bus pass). For filling the above form (copy attached), the below mentioned attested documents are required:-

- 1. Schedule caste certificate(attested)
- 2. Copy of receipt of bus pass
- 3. Aadhaar card(attested)
- 4. Domicile certificate(attested)
- 5. Copy of bus pass(attested)
- 6. Bank account no. with IFSE code
- 7. Metric certificate (attested)
- 8. Copy of Income Certificate (attested)

After the last date i.e.08/02/2022, no application will be considered.

Account Officer 02

CDL State Instt. Of Engg. & Tech.

Panniwala Mota(Sirsa)

CC:

- 1. P.A. to D.P.for kind information of Director-Principal.
- 2. All Notice Boards.
- Programmer, with a request to upload the same on institute website.

GOVERNMENT OF HARYANA

Applicat (The candidate	ion from fo	r Reimburse	mento	ieduled Cast f state Trans the principal cond	mort For	ilitian /Tun	in Pass to SC so not than last da	Students te of submission.)	
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Shri/Shrimati/Kumari			TIT					Self-Attested	
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2, rather s	/ riusband's	Name:							
3. Wheth	er belong to	Scheduled Ca	aste Cate	gory:Y N	o 🔲				
If yes, cas	ste:								
4. Full Ad	dress								
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5. Email A	Address:								
6. Mobile/	Phone No:								
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(a) Year of	Admission	(b) Course/	Trade	(c) Class/Se	mester				
10 Whethe	r the student	is residing in	Institute'	s Hostoli	للل	Yes To			
11. Charges	Paid by the	Student for Sta	te Trans	s Hostel. port/ Train Pa	ss:	Yes 🔲 o			
11. Charges Paid by the Student for State Transport/ Train Pass: Distance Amount for six						e period	State	Train	
From	То	Kilometer	Montl	n Pass (Rs.)	From	То	Transport	Pass	
							Pass		
I/we hereby	v declare that	t I/we have re	d the rec	rulations of th	o schom o	and	abide by the		
conditions	of the schem	e. I/we certify	that state	ements made i	n the apr	dication are	correct and if	terms and	
is found to t	e the incorre	ect by the auth	ority who	ose decision w	ill be fina	al and hindin	g on malue 1/	1410	
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paid to me/	us. raining w	nich the said a	uthority	may recover t	he amou	nt from mal	ic through wh	atarran	
propose.	an proper or	may take lega	l action a	is deemed fit,	that I hav	e not claime	d the benefit fo	or any other	
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Date:					(a)	Signature of	applicant		
Place:					(B)	Signature of	Parents/Guar	dian	
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