THE TAMIL NADU Dr. M.G.R MEDICAL UNIVERSITY
No. 69, Anna Salai, Guindy, Chennai - 600 032

T.A. BILL OF MEMBERS OF INSPECTION COMMISSION APPOINTED TO INSPECT INSTITUTION / COLLEGE FOR GRANT OF AFFILIATION

1. a) Name & Designation of the Convenor / Member (IN BLOCK LETTERS)
   b) Mobile Number :
   c) E-Mail I.D. :

2. Institution in which working (with full Address and Phone No. (IN BLOCK LETTERS)

3. University's Ref. No. & Date of Order of Appoinment of Inspection Commission :

4. Purpose of Inspection : To issue Certificate of Registration / To Grant Provisional Affiliation / To Grant Continuance of Provisional Affiliation / To Increase Seats / Full Affiliation

5. Name of the Institution / College Inspected (Medical / P.G.Degree / Diploma / Super Speciality Courses / Fellowship Programme) :
   1. :
   2. :
   3. :
   4. :

6. Name of the Course for which the inspection was conducted :

7. Date of Inspection :

8. Details of Journey :

<table>
<thead>
<tr>
<th>Dates and Hours of Journey</th>
<th>Number of Kms. Travelled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mode of Travel</td>
<td>Class</td>
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</tbody>
</table>

Reservation Charges Rs.
Development Charges Rs.
*Honorarium Rs.
*Halting Allowance Rs.
*Conveyance Rs.
Total Rs.

*Eligible rates furnished on the reverse side of this form
Certified that I have actually inspected the institution on the dates indicated above and sent the inspection report to the University on ........................................................................................................

Address:
Preferably Residential
Address for Despatch
of Cheques etc

One Rupee Revenue Stamp should be affixed if the claim exceeds Rs. 5000/-

Signature of Convener / Member :

Eligibility of T.A.
1. Air Fare or I Class A/C Train Fare (both ways) by the shortest route
2. Honorarium Rs. 2000/-
3. Halting Allowance Rs. 1000/-
4. Conveyance Rs. 250/- per day

(CLAIMS WITHOUT SIGNATURE WILL NOT BE ENTERTAINED)

(FOR UNIVERSITY USE)

Passed for Payment of Rs. ..............................................
(Rupees ............................................................................)

Senior Accounts Officer / Finance Officer
(Cheque No. .................. Date : .................. for Rs. ..............)

Annexure
(INSTRUCTIONS TO THE INSPECTORS)

1. Travelling Allowance will be paid only for the shortest route.
2. All columns in the T.A. Bill should be filled in without omission.
3. If the journey is performed by Air, xerox copies of Air Tickets and Boarding Pass (both ways) should be produced.
4. If the journey is performed by train, I Class A/C Fare and Reservation charges will be allowed for both ways.
5. If the journey is performed in bus, the actual bus fare will be allowed.
6. Any excess claim made by the inspector will be restricted to actuals according to University rules in force.