

**TRIBAL RESEARCH AND TRAINING INSTITUTE (TRTI), PUNE**  
**GOVERNMENT OF MAHARASHTRA**

Utilization Certificate for Contingency Amount

**Tribal Research and Training Institute (TRTI) Fellowship (STRF) - 2023-24**

1. Name of the Fellow: .....
2. Year of the Fellowship:.....
3. TRTI Award Letter No.:.....
4. Date of Registration : .....
5. Duration of Expenditure:.....TO.....

This is to certify that, Mr./Miss/Mrs.....,  
has received contingency amount Rs..... (in words)  
..... on year ..... from TRTI  
under Scheduled Tribes Research Fellowship (STRF) – 2023-24.

The received contingency amount has been utilized for the purpose of said research only or for which it was sanctioned in accordance with the terms and conditions laid down by the TRTI, Pune.  
Details of expenditure in respect to contingency Grant is as below.

Sr.No	Details	Date of Bill	Amount
1.	Books and allied items		
2.	Typing (Tracing & ammonia printing )		
3.	Stationary		
4.	Postage		
5.	Chemical goods/Laboratory consumable Items.		
6.	Electronic/Electric goods		
7.	Travel/Fieldwork/Seminars/Workshop registration fee.		
8.	Payment of membership fees to professional organization related to area of research.		
	TOTAL		

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

Signature

Date:

Name of the Candidate

Signature

Name:

Date:

**Guide/Supervisor**

Signature

Name:

Date:

Signature

Name:

Date:

**Head of Department  
(Seal)**

**Principal  
(Seal of College)**