



**राष्ट्रीय प्रौद्योगिकी संस्थान नागालैंड**  
**NATIONAL INSTITUTE OF TECHNOLOGY NAGALAND**  
(An Institute of National Importance under MoE, Govt of India)  
Chumukedima, Nagaland-797 103

**FORM: 17B**

**CPDA TA/DA REIMBURSEMENT AFTER ATTENDING NATIONAL/INTERNATIONAL  
CONFERENCE/WORKSHOP/SYMPOSIA/TRAINING**

1. Name of claimant: \_\_\_\_\_
2. Designation \_\_\_\_\_ 3. Department: \_\_\_\_\_

**A. Travelling Details (AIR/TRAIN/ROAD in India/Abroad)**

Departure		Arrival							
Date	Time	Date	Time	From	To	Distance (in Km)	Mode of Journey	Fare	Remarks (Ticket No.)
<b>Total :</b>									

(if travelled by Air, boarding Pass to be enclosed)

**B. Registration Fees:** \_\_\_\_\_

**C. DA/Per Diem Allowance:** \_\_\_\_\_

All Event/Visit Days	Additional Days	DA/Per Diem Allowance	Conversion Rate*	Total

**D. Accommodation Charges:**

Check In		Check Out		Numbers of Days	Amount
Date	Time	Date	Time		

**E. Visa Fee:** \_\_\_\_\_ **F. Travel Insurance Charges** (as per actual) \_\_\_\_\_

**G. Any other expenses** \_\_\_\_\_ **H. Advance Drawn: Rs** \_\_\_\_\_

**Grand Total (A+B+C+D+E+F+G):** \_\_\_\_\_ **Net Payable (Advance -Grand Total):** \_\_\_\_\_

1. Free Boarding provide: YES/NO  
2. Free Lodging provided: YES/NO

Date: \_\_\_\_\_

(Signature of the Claimant)

(Head of the Department)

**For Office Use Only**

Advance Paid: \_\_\_\_\_

Now claimed: \_\_\_\_\_

Amount to be Reimbursed/Refund: \_\_\_\_\_

Rupees \_\_\_\_\_

may be reimbursed to \_\_\_\_\_

**(Junior Assistant)**

**(Assistant Registrar)**

**(Registrar)**

**(Director)**