

CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES
J.L.N.B.C.A.H. Anusandhan Bhawan, No.61-65, Institutional Area,
Opp. 'D' Block, Janakpuri, New Delhi

To,

The Director General
CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCES
No.61-65, Institutional Area, Opp. 'D' Block,
Janakpuri, New Delhi

Sub : Application for Grant of Temporary Advance from the CCRAS contribution Fund.

Sir,

1. Name of Subscriber
(in Block letters) : _____
2. a) Provident Fund Account No. : _____
b) Name of Office:-Head Quarter, C.C.R.A.S., New Delhi.
3. Designation : _____
4. Basic Pay : _____
5. Balance at credit of the subscriber on the date of application:
6. Amount of advance outstanding if any and
the purpose for which advance was taken then : _____
7. Amount of advance required : _____
8. Reason for which advance is
required (Rules 13 (i)) : _____
9. Amount of the consolidate advance (item 6 & 7)
and number (and amount of monthly installments
in which the consolidated advance is proposed to be repaid.: _____
10. Full particulars of the pecuniary circumstances
of the subscriber justification the application
for the temporary withdrawal : _____

proof to be submitted with application.

Place : _____

Date : _____

Signature of subscriber