तमिलनाडु केन्द्रीय विश्वविद्यालय

(संसद द्वारा पारित अधिनियम 2009 के अंतर्गत स्थापित)

CENTRAL UNIVERSITY OF TAMIL NADU

(Established by an Act of Parliament, 2009)

नीलक्कुड़ी परिसर/Neelakudi Campus, तिरुवारूर/Thiruvarur - 610 005.

04366-277261.

CUTN-13(188)/2025- AC/1036 **Date: 23/07/2026**

NOTIFICATION

Sub: Submission of University Fellowship Monthly Attendance Claims – reg.

I am directed to inform you that, in accordance with Notification No. CUTN/FO/2018-19/1933 dated 28/03/2019, all departments are adhere to forward the scholars University Fellowship claim forms collectively to the Academic Section latest by the **10th of every month**. The claim form submitted after the deadline will not be processed in the current month.

23.07.2026

Dean (Academics)

To

All Head of Departments, CUTN.

प्रो. एस. नागराजन / PROF. S. NAGARAJAN
संकायाध्यक्ष (शैक्षिक) / Dean (Academics)
तमिलनाडु केंद्रीय विश्वविद्यालय
Central University of Tamil Nadu
तिरुवारूर / Thiruvarur – 610 005

Copy to:

1. Finance Officer, CUTN.
2. All Dean of Schools, CUTN.
3. All Head of Department, CUTN.
4. All Faculty members, CUTN.
5. Dean (Student Welfare), CUTN.
6. System Analyst, CUTN – (for uploading in University website).
7. Central Library, CUTN.
8. PS to VC, CUTN.
9. PS to Registrar, CUTN.
10. Hostel Office, CUTN.

தமிழ்நாடு மத்திய பல்கலைக்கழகம்
(संसदद्वारापारितअधिनियम 2009केअंतर्गतस्थापित)
CENTRAL UNIVERSITY OF TAMIL NADU
(Established by an Act of Parliament, 2009)
नीलक्कुड़ी परिसर /Neelakudi Campus, तिरुवारूर/Thiruvarur – 610 005,
तमिलनाडु /Tamil Nadu, भारत /INDIA.

University Fellowship Claim Form

Fellowship claim for the month of _____

1. Name of the Scholar	
2. Registration Number	
3. Department	
4. Date of Joining in Department	
5. Name of the Supervisor	
6. Fellowship per month	
7. Fellowship claimed for the period (from to date & also mention the number of days)	
8. Percentage of Attendance for the period	
9. Leave if any availed more than permissible leave	
10. Fellowship Claimed Amount	
11. Bank details: (Account number, IFSC code)	
12. Date of Joining in Hostel	
13. Present Hostel & Room number	
14. Pending dues in Hostel	

Signature of the Scholar

1. The above-mentioned scholar is a bonafide full-time Ph.D. research scholar working under my supervision.
2. To the best of my knowledge, the scholar is not receiving any other fellowship, scholarship, or financial assistance from any other source during the claim period.
3. The scholar has not availed any unauthorized leave during the claim period.
4. I recommend the release of Non-NET Fellowship for the above-mentioned period, as per University norms.

(Note: This is to inform that signatures from the Hostel Office and the Chief Warden are required only for hostel students)

Signature of the Supervisor

Remarks from the Hostel Office

Signature of the Chief Warden, Hostel
with Seal

Academic Section

Date: