



Loan Request Form



Requisitioner

Name	Designation
Emp ID	Campus
Project name	
Funding agency name	
Budgeted amount (Rs)	
Project start date	Bank account details
Purpose of loan	Loan request month

Previous loan details (if any)

S #	Period	Amount	Loan status	
			Returned	Not returned
1				
2				
3				
TOTAL				

Current loan breakdown of salaries for the month of

S #	Name	Designation	Period	Net Pay
1				
2				
3				
4				
TOTAL				
Date			Signature	

Campus Accounts

Attachments (Please check the relevant box)			
Verified	<input type="checkbox"/>	Not Verified	<input type="checkbox"/>
1) Salary Verification	<input type="checkbox"/>		
2) Bank Statement	<input type="checkbox"/>		
3) Remaining Project Balance	Rs		
4) Recommended Amount	Rs		
Prepared & forwarded by		Designation	
Date		Signature	

Campus Director

Remarks	Recommended	<input type="checkbox"/>	Not Recommended	<input type="checkbox"/>
Name				
Date	Signature			

NUCES-HQ

ORIC

Remarks by Grants Management Officer				
Date	Signature			
Director ORIC	Recommended	<input type="checkbox"/>	Not Recommended	<input type="checkbox"/>
Date:	Signature			

Director Finance

Remarks	Recommended	<input type="checkbox"/>	Not Recommended	<input type="checkbox"/>
Name				
Date	Signature			

Rector

Remarks	Approved	<input type="checkbox"/>
	Not Approved	<input type="checkbox"/>
Name		
Date	Signature	