

**Faculty Affairs Division BITS/FAD/I-U Immersion / 2025-26**

R

Reimbursement of expenditure made towards Industry Immersion

Date:

To

The Associate Dean, FAD

BITS Pilani, Hyderabad Campus, Hyderabad

**Sub: Reimbursement of the expenditure on Industry Immersion**

Dear Sir/Madam,

Kindly approve the reimbursement of the following expenditure spent on my visit to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_under the Industry Immersion programme

# Statement of the expenditure

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenditure Details** | **Maximum Financial support from the institute (Rs.)** | **Amount claimed (Actuals) for -----------Days** | **Approved amount** |
| **Travel Cost as per the eligibility (actual)** | **18, 000/-** |  |  |
| **Lodging cost (actual per week)** | **7,000** |  |  |
| **Boarding cost (fixed per day):** | **300** |  |  |
| **Miscellaneous including local**  **travel (fixed per week.):** | **2,000/-** |  |  |
| **Total** |  |  |  |
| **Advance taken** |  |  |  |
| **Balance** |  |  |  |

Thank you

Name Dept. Period

Signature, HOD Date:

# FAD Office Purpose

Approved / Not Approved

Budget Code Sanctioned Budget

Amount spent (including this bill) Amount Remaining \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, Associate Dean (FAD):

**Birla Institute of Technology & Science,**Pilani Hyderabad Campus



**Tel: Fax:**

+91 40 6630 3999

+91 40 6630 3998

Jawahar Nagar, Shameerpet Mandal

Hyderabad 500078, Telangana, India

**Email:** [gad@hyderabad.bits-pilani.ac.in](mailto:gad@hyderabad.bits-pilani.ac.in)

**Web:** <http://www.bits-pilani.ac.in/hyderabad>