



साहा परमाणु भौतिकी संस्थान

SAHA INSTITUTE OF NUCLEAR PHYSICS

1/एएफ, बिधाननगर, कोलकाता - 700 064

SECTOR-I, BLOCK-'AF', BIDHANNAGAR, KOLKATA-700064

ATTENDANCE FORM

(Please fill up the form in Block letters and submit it to Establishment Section)

FOR THE MONTH OF _____

NAME

:

Telephone No.
(Mandatory)

:

E-Mail

:

No. Of Days Present

:

Funding Agency
(Put Mark)

:

SINP CSIR UGC DBT DST OTHERS, then specify the name

Designation
(Put Mark)

:

RA JRF SRF ERF

(Name & Signature of the Fellow with date)

(Name & Signature of the Supervisor with date)

(For office use only)

Establishment Section :

Comments if any:

Signature with date:

Last date of submission of Attendance Form is **20th** of the claim month.
Attendance for the period from 15th day of the previous month to 14th day of the claim month.