



VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY BURLA

ବୀର ସୁରେନ୍ଦ୍ର ସାଏ ବୈଷୟିକ ବିଶ୍ୱବିଦ୍ୟାଳୟ

(A UGC Recognized State Government University by an Act of Assembly, Estd. -1956)

P.O. Engineering College, Burla, Dist: Sambalpur, Odisha, (India) -768 018

www.vssut.ac.in. e-mail: vc@vssut.ac.in

No. VSSUT/SCH/139 /2024

Dated: 02.08.2024

NOTICE

It is hereby inform to all students who are applying for Fresh/Renewal of Nirman Shramik Kalyan Yojana (Edn Astt) Scholarship for the Academic Year 2023-24 have to fill-up the below listed attendance report and Submit the hardcopy to the office of Scholarship cell, VSSUT, Burla, duly signed by the respective Head of School. Submit the attendance report within the due date for further processing.

Institute Nodal Officer,
Scholarship Section, VSSUT, Burla
Institute Nodal Officer
Scholarship Section
VSSUT, Burla-768018

Memo No. VSSUT/SCH/140/2024

Copy to:

1. University Notice board.
2. Dean F & P with a request to hoist the notice on our University website.
3. PA to Registrar for kind information.
4. PA to VC for kind information of Hon'ble Vice-Chancellor.

Institute Nodal Officer,
Scholarship Section, VSSUT, Burla
Institute Nodal Officer
Scholarship Section
VSSUT, Burla-768018

Attendance Report(August-2023 to December - 2023)

Course Name-		Name of Department-					
Name of Student-				Semester-			
Registration No.-							
Sl. No.	Name of Subject	Month & Year	No. of Classes held	No. of Classes Attended	% of Attendance	Teacher Name	Signature
1		Aug-23					
		Sep-23					
		Oct-23					
		Nov-23					
		Dec-23					
2		Aug-23					
		Sep-23					
		Oct-23					
		Nov-23					
		Dec-23					
3		Aug-23					
		Sep-23					
		Oct-23					
		Nov-23					
		Dec-23					
4		Aug-23					
		Sep-23					
		Oct-23					
		Nov-23					
		Dec-23					
5		Aug-23					
		Sep-23					
		Oct-23					
		Nov-23					
		Dec-23					

Attendance Report(January-2024 to June- 2024)

Course Name-		Name of Department-					
Name of Student-				Semester-			
Registration No.-							
Sl. No.	Name of Subject	Month & Year	No. of Classes held	No. of Classes Attended	% of Attendance	Teacher Name	Signature
1		Jan-24					
		Feb-24					
		Mar-24					
		Apr-24					
		May-24					
		June-24					
2		Jan-24					
		Feb-24					
		Mar-24					
		Apr-24					
		May-24					
		June-24					
3		Jan-24					
		Feb-24					
		Mar-24					
		Apr-24					
		May-24					
		June-24					
4		Jan-24					
		Feb-24					
		Mar-24					
		Apr-24					
		May-24					
		June-24					
5		Jan-24					
		Feb-24					
		Mar-24					
		Apr-24					
		May-24					
		June-24					

ANNEXURE-II

Name of Student:

Regd. No:

Department:

Name of Scholarship:

Fresh/Renewal:

Academic Year:

Aug-2023		Sept- 2023		Oct-2023		Nov-2023		Dec-2023		Jan-2024		Feb-2024	
Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present
Mar-2024		April-2024		May-2024		June-2024							
Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present	Total days	Total present

Head of Department
Signature with seal

VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY : BURLA



(Formerly University College of Engg., Burla - Established by Govt. of Odisha in 1956 & Upgraded in 2009 to A State Govt. University Covered under Section 2(f) & 12(B) of UGC Act.)

P.O: Engineering College, Burla (Siddhi Vihar), Dist: Sambalpur
Odisha- 768018, INDIA

DECLARATION CUM UNDERTAKING

I, Sri/Smt _____ a _____ (Year) student of _____ (B.Tech/M.Tech/Int.MSc/2YrMSc/PhD/MCA/B.Arch) _____ (Department) bearing Institute Roll No. _____ do hereby solemnly declare that I will strictly adhere to the rules and regulations for grant of Scholarship. If, later on it is found that the above norm is violated, then the Scholarship will be cancelled and the entire amount of Scholarship with interest will be refunded by me. Also, I hereby undertake that the documents provided by me are true and correct to the best of my knowledge & belief and in the event of those being found to be forged/false the terms and conditions of the Scholarship are sanctioned to me will be cancelled, and action as deemed fit may be taken against me.

Signature of Candidate: _____

Name of Scholarship applied: _____

Candidate's mobile No.: _____

FOR OFFICE USE ONLY

Name of Candidate:

Registration Number:

Branch/Specialization:

Attendance of number of working days (Average of total semester)	Attendance of number of days present (Average of total semester)	Percentage of Attendance

Signature of HOD with seal