CASH (1ST Copy)	PAY-IN-SLIP	CASH (2ND Copy	<i>'</i>)	PAY-IN-SLIP	CASH (3RD Copy)	1	PAY-IN-SL	
(То	be retained by the BANK)	(Т	(To be send by Applicant to CSIR)			(To be retained by the Applicant)		
candidates applying	through BANK Challan is applicable only for g ON-LINE. NET) Examination June, 2011	candidates applyi	Remittence of Fee through BANK Challan is applicable only for candidates applying ON-LINE. Joint CSIR-UGC (NET) Examination June, 2011			Remittence of Fee through BANK Challan is applicable only for candidates applying ON-LINE. Joint CSIR-UGC (NET) Examination June,2011		
Designated Nodal I CSIR saving A/c No	Branch 0: 8 2 4 3 0 5 5 5 3	Designated Nodal CSIR saving A/c N	Branch 	5 5 3	Designated Nodal CSIR saving A/c N	Branch o:. <mark>8 2 4 3 0 5</mark>	553	
Detail of Fee (Please Tick fee, as applicable)			Detail of Fee (Please Tick fee, as applicable)			Detail of Fee (Please Tick fee, as applicable)		
Category	Amount	Category	Amount		Category	Amount		
General	Rs.400/-	General	Rs.400/-		General	Rs.400/-		
ОВС	Rs.200/-	OBC	Rs.200/-		OBC	Rs.200/-		
SC/ST/PH/VH	Rs.100/-	SC/ST/PH/VH	Rs.100/-		SC/ST/PH/VH	Rs.100/-		
	To be filled by be the Applicant							
	To be filled in by the Applicant Centre Code: Category Code:	Subject Code:	To be filled in by the Applicant Subject Code: Centre Code: Category Code:			To be filled in by the Applicant Subject Code: Centre Code: Category Code:		
Name (Block letters	s) :	Name (Block lette	ers):		,	rs) :		
Address (Block letters) :			Address (Block letters) :			Address (Block letters) :		
Deposit Fee Amount: Date: Date: Deposit Fee Amount: Date: Deposit Fee Amount: Deposit		(In figure)	Deposit Fee Amount: Date: Date: Deposit Fee Amount: Deposit Fee Am			Deposit Fee Amount: Date: Date: Un figure) Deposit Fee Amount: Dep		
(In words) Phone/Mobile Num		(In words)				(In words) Phone/Mobile Number:		
	APPLICANT SIGNATURE	<u></u>	Α	APPLICANT SIGNATURE			APPLICANT SIGNATUR	
	For Bank Use Only	'	For Bank Use Only			For Bank Use Only		
Deposit Journal No Bank Name Bank/Branch code	e amount on(date)	Deposit Journal N Bank Name Bank/Branch code	ve amount on	, ,	Deposit Journal No Bank Name Bank/Branch code			
	(Signature with seal of the depositing Bank)		(Signature with sea	al of the depositing Bank)		(Signature with	seal of the depositing Banl	
	anch code and Branch name / City Must be given by the Bank. uested to accept deposits only upto: $30.03.2011$.	Note: 1. Bank name. Branch code and Branch name / City Must be given by the Bank. 2. Bank is requested to accept deposits only upto: 30,03.2011.			Note: 1. Bank name. Branch code and Branch name / City Must be given by the Ban 2. Bank is requested to accept deposits only upto 30.03.2011.			

As per agreement with Indian Bank, West Patel Nagar, New Delhi, all CBS Branches of Indian Bank are authorized to collect the fees.

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