

Consolidated Statement Showing Number of Candidates and Examination Fees Deposited

Applicable for Late fee Deposits only

Name of the Institute:
 Institute Code: Old..... New..... E-mail Id: Mobile No. of Principal:

Scheme Name (Please Delete the fields which are not applicable)	Trade Name	Number of Students		Examination Fee			Total Fee deposited (AxB) Rs.	Deposit/Bank Details			
		Regular	Reappear	Total (A)	Without late fee	Late Fee @1000/- per student		Total (B)	Date of Deposit	Name of Bank	Mode of Deposit
NCVT					525/- (450+75)	1000/-	1525/-			RTGS	
NCVT Private (industries)					625/- (550+75)	1000/-	1625/-			Cash	
NCVT (SCVT to NCVT)					550/-	1000/-	1550/-			Demand Draft	
SCVT(Semester/ Conventional)					450/-	1000/-	1450/-			Any other mode	
COE					450/-	1000/-	1450/-			Total Amount (C)	
Apprenticeship					450/-	1000/-	1450/-				
Art & Craft					500/-	1000/-	1500/-				
Teacher Training					450/-	1000/-	1450/-				
TOTAL Fee Deposited (C)											
								Bank Transaction ID:			
								Enrollment No. (As per fee receipt generated from Board's website).....			

• Certified that the above mentioned data is compiled on the basis of details filled in Excel file, submitted by the institute to the Board.

• I undertake to submit the following documents/details:

- i) Scanned copy of Fee Receipt generated from the website of the Board.
- ii) Excel file duly filled in by the institute.
- iii) Scanned attested copy of the consolidated statement as above.
- iv) Reports (lists) of Exam Fee Status downloaded from MIS portal.

• The requisite information and documents, under 2 above, will be sent at e-mail id contitipb@gmail.com with a copy on reconciliation.fees@gmail.com.

• That in case any irregularity is found/detected at any stage, the institute will solely be responsible for the consequences arising as a result of that irregularity.

Date:

Signature of Principal/Head of Institute

Full Name (Block Letters):

Seal of Office

Consolidated Statement Showing Number of Candidates and Examination Fees Deposited

Name of the Institute: E-mail Id:
 Institute Code: Old..... New.....
 Name of Examination: **AITT under Apprenticeship Training Scheme** Mobile No. of Principal:

Sr. No.	Trade Name	Number of Students			Examination Fee	Total Fee deposited (Ax B) Rs.	Deposit/Bank Details							
		Regular (MIS portal Registered)	Reappear (Ex- failed)	Total			Date of Deposit	Name of Bank	Mode of Deposit	Amount				
					@ Rs. 450/- per Student									
					(B)									
		TOTAL A												
		No. of Students												
											Bank Transaction ID:			
											Enrollment No. (As per fee receipt generated from Board's website).....			

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 Full Name (Block Letters):
 Seal of Office