

UNIVERSITY GRANTS COMMISSION 35, FEROZ SHAH ROAD NEW DELHI – 110 001

No.F.1-3/2012 (HRE) Policy Part File

March, 2016

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The Registrar
Shivaji University
Vidyanagar, Kolhapur – 416 004
Maharashtra

Subject: Submission of Proforma for implementation of Public Finance

Management System (PFMS) for disbursement of funds under the

Scheme of Human Rights Education.

Sir/ Madam,

With reference to the above subject, I am directed to enclose herewith proforma with the request to fill up it in all respects and send the same to the UGC by E-mail hresection@gmail.com urgently, as this information is required for registration of Universities/ Colleges on Public Finance Management System (PFMS) for any disbursement of UGC funds under the Scheme of "Human Rights Education".

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Yours faithfully,

(Pius Bilung) Section Officer

Encl. as above



Shivaji University, Kolhapur – 416004 (Maharashtra) Colleges & Uninversity Development Section. Phone No. (EPBX) – 2609000 Ext. 2609145

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The Principal/Director, All Affiliated Colleges/ Institutions.

For information and necessary action.

Date : 9 MAY 2016

Dy. Registrar, C. & U. D. Section. Following are the details required for registration of Universities/ Colleges on Public Finance Management System (PFMS) for any further disbursement of grant from UGC. In case, the Institutions is already registered with PFMS and receiving grant from other agencies of Central/ State Government(s) through PFMS, it has to indicate the PFMS unique code along with relevant details. The details of Account number for disbursement grants under various scheme of UGC to the Institution to be indicated in the format given overleaf (details of multiple accounts may be given in similar format).

PFMS unique Code (if available)	<u> </u>
Agency Name (University/ College)	
Agency Type	
Hierarchy of Agency	
(Central/State)	
Act through which Institutions is established / Registration No (under trust/ Societies Act etc)	
Date of Registration/ Notification	
Registering Authority	
State	
TIN No.	
TAN No.	
Block No./Building/Village/ Name of	
Premises	
Road/Street/Post Office	
Area/Locality .	
City	
State	
District	
Pin Code	
Contact Person	
Designation	
Phone	
Alternate Phone/Mobile No.	•
E-mail	• .

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Scheme	
Funding Agency (a) will receive funds	Minnigia of Sala e enevadad Bygsavenishingsangibun
directly from central government	
(b) will receive funds from this agency	
Bank Name	
Branch Address	
Pin Code	
Branch Name	
IFSC Code	
MICR Code	
BSR Code	
Bank Account No.	
Agency Name as per Bank Account	

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