



व्यावहारिक प्रशिक्षण बोर्ड (पूर्वी क्षेत्र)  
**BOARD OF PRACTICAL TRAINING (EASTERN REGION)**

भारत सरकार के शिक्षा मंत्रालय के उच्चतर शिक्षा विभाग के अधीन  
UNDER MINISTRY OF EDUCATION, GOVT. OF INDIA, DEPARTMENT OF HIGHER EDUCATION



सशक्त युवा, समर्थ भारत  
www.mhrdnats.gov.in

BOPT/DT/DT/2022-23/

Date: July 05<sup>th</sup>, 2022

To

All the GM (HR) / Representative of establishment registered in NATS  
(Engaging Graduate/Technician Apprentices)

Sub: Submission of stipend claim bills in manual mode by establishments registered in NATS and engaged non-engineering graduates.

Dear Sir/Madam,

Wishing you a very warm season greetings!

We are glad to inform you that BOPT invites all such establishments registered in NATS and engaged apprentices in non-engineering category to submit claim bills in manual mode till the portal site is developed and functioning fully. The manual procedure requires the establishments to prepare claim bills in the format (F7) attached herewith and the sealed and signed copy of the original copy of the bill must be submitted with a covering letter on the establishment head, along with completely filled-in Record of Progress (F6) for each apprentice for the quarter claim in the format also attached herewith. The completed documents as mentioned above must be submitted to BOPT office at the earliest possible to enable us to disburse the claim to all such establishments.

The requirement of Central Govt. to disburse such claims of establishment in ECS mode is mandatory requirement. For this we are also enclosing a form (Form - 14) which is required to be filled-in original and submit to this office along with the above mentioned documents as a one time requirement to enable to disburse claim amount through ECS.

Wishing you all a very best for your support and cooperation.

Thanking you,

Yours faithfully,

Sd/-

(S.M. Ejaz Ahmad)  
Director



ब्लॉक - ईए, सेक्टर - I (लावोनी संपदा के विपरीत), साल्ट लेक सिटी, कोलकाता - 700 064, दूरभाष /Phone - (033) 2337-0750/51, फैक्स /Fax - (033) 2321-6814  
Block - EA, Sector - I (Opposite. Labony Estate), Salt Lake City, Kolkata - 700 064, ई-मेल /E-mail - inf@boptr.gov.in, वेबसाइट/website - www.boptr.gov.in

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**BOARD OF PRACTICAL TRAINING (EASTERN REGION)**  
 (Ministry of Education, Department of Higher Education, Govt. of India)  
 BLOCK-EA, SECTOR-I, (OPP.LABONY ESTATE), P.O-SALT LAKE CITY, KOLKATA-700 064

**RECORD OF PROGRESS OF APPRENTICE:**

( To be submitted once in a quarter in respect of Non Engineering Graduate(s) or Technician Apprentices)

Name: \_\_\_\_\_ Registration No. \_\_\_\_\_

Subject field in (Designated/Optional Trade): \_\_\_\_\_

Under Training at \_\_\_\_\_

Date of commencement: \_\_\_\_\_

Area of Training during the quarter: \_\_\_\_\_

\_\_\_\_\_

Progress report for quarter: \_\_\_\_\_ to \_\_\_\_\_

i) Aptitude for training: \_\_\_\_\_

\_\_\_\_\_

ii) Performance during the quarter: \_\_\_\_\_

\_\_\_\_\_

iii) Shortcomings, if any: \_\_\_\_\_

\_\_\_\_\_

iv) Reaction of Trainee to corrective action at (no. iii) above: \_\_\_\_\_

\_\_\_\_\_

v) ASSESSMENT:-

Excellent / Very Good / Good / Unfit (Strike out those not applicable)

\_\_\_\_\_  
Signature of Officer/Executive-in-charge  
of Training.

\_\_\_\_\_  
Signature of Manager of the  
Industry/Establishment

Date:

Record of Progress of App.(6)/2022/02



**BOARD OF PRACTICAL TRAINING (EASTERN REGION)**  
**MINISTRY OF EDUCATION, GOVT. OF INDIA, DEPARTMENT OF HIGHER EDUCATION**  
 Block-EA, Sector- I, Salt Lake City, Opp to Labony Estate, Kolkata - 700064  
**STIPEND CLAIM FORM (NON-ENGINEERING)**



50% ON PRESCRIBED RATES UNDER THE APPRENTICES ACT, 1961 AS AMENDED IN 1973, 1986 & 2014 RESPECTIVELY  
 QUARTERLY CLAIM BILL FOR REIMBURSEMENT OF GOVERNMENT SHARE OF STIPEND

Name of The Establishment :  
 Establishment No. :  
 Name of Drawing & Disbursing Officer :

Name of the Bank :  
 Account No. :  
 IFSC Code No. :

Sl. No.	Registration No. (as per contract)	Date of Engagement	Name of Apprentice (s)	Registration Type	Rate of Stipend as per contract (per month)	Actual Payment		Deduction		Reimbursement			Bank Details
						Period to which claim relates	Total Net Amount Paid to Apprentice (As per Bank Statement)	Number of Days absence/leave availed without stipend	Deduction due to absence/leave without stipend (50% on minimum prescribed rate in Rs.)	Govt. prescribed rate (per month)	50% Amount to be reimbursed by Govt. for period in (7)	50% share of Stipend of Govt. on minimum prescribed rate (Net in Rs.) Claimed by taining establishment	
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1													
2													
3													
4													
5													
						<b>Total</b>							

Certified that (i) net amount shown in column 8 against each apprentice has been paid directly to the bank account as mentioned against each apprentice (in the table above) by this office during the period for which the claim has been raised, All necessary documents in relation to the actual payment of stipend to each apprentice as mentioned above are maintained by this office and shall be furnished to the Regional Central Apprenticeship Advisor or his nominee for verification as and when required. (ii) The amount shown under column 13 has been claimed in accordance with the provisions of the Apprentice Act, 1961 as subsequent amendments thereon and has not been claimed earlier.

Signature of the Employer/Competent Authority  
 on his behalf with Date & Office Seal

STIPEND CLAIM FORM- DECLARATION BY THE FINANCE Head for claim Bill

I hereby declare on behalf of M/S

that the net amount shown in column no 8 against each apprentice (s) has actually been paid through the respective bank account of the apprentice (s) as mentioned in this request form, valid receipt for which is maintained with our establishment's office.

It is further to declare that the statement made above is absolutely true and authentic. Terminated apprentices have not been included in this claim. The amount shown under column 13 has been claimed in accordance with the provisions of The Apprentices Act, 1961 and subsequent amendments thereon and has not been claimed earlier. In the event of the above statement made subsequently turning out to be incorrect or false, the undersigned has understood and accepted that such incorrect declaration in respect of its contents shall be treated as non-compliance of the provisions of The Apprentices Act, and The Apprenticeship Rules, as amended from time to time thereby rendering the undersigned liable for necessary action deemed fit under Section 30 of The Apprentices Act.

Amount to be paid Rs.

Finally admitted for payment Rs.

Signature, Seal, Designation,  
Date & Name of the Authority

**Instructions to be followed while filling the statement for Claiming reimbursement from the Government of India**

1. Do ensure the bank account details of apprentices available in this form is the one to which stipend was paid as it will be validated before reimbursement is processed. In case of discrepancy, the bank details of apprentice has to be modified by the apprentice from their profile section before raising claim reimbursement request.
2. Column 6: The actual rate of stipend paid should be indicated even though it may be higher than the minimum rate.
3. Column 7: The format to indicate the period pertaining to the claim shall be of the format dd-mm-yyyy, e.g. 20-10-2020 to 31-12-2020.
4. Column 9: The number of days of absence / leave on loss of stipend should be indicated for the period of claim as in Column 7.
5. Column 9, 10: While calculating the stipend for part of a month and the deductions due to leave or absence on loss of stipend, the number of calendar days in a month should be taken on the basis in respect to the number of working days in that month.
6. Column 11: The amount to be reimbursed by the Central Government will be 50% of the minimum stipend amount as prescribed below. This is effective from 01- Apr-2021.

Graduate Apprentice
Rs. 9000/- per month

7. Column 12: Indicates 50% of the amount of stipend to be reimbursed for the period indicated in column 7, e.g. For a 3 month period, the amount for Graduate apprentice will be Rs. (9000 per month \* 3 months)/2.
  8. Column 13: For calculating the net amount to be disbursed, deductions other than that due to absence / leave without stipend should not be taken into account.
  9. Claim in respect of Technician (Vocational) Apprentices may be made separately, without clubbing the same with that of Graduate and Technician Apprentices.
- Note: While sending this for reimbursement of stipend, the following information may please be furnished to this office
- (a) Complete postal address of the establishment
  - (b) The designation of the officer in favour of whom the cheque to be drawn

**ELECTRONIC CLEARING SERVICE ( CREDIT CLEARING )**  
**(Mandate Form)**  
*(Employer's option to receive payments through Credit Clearing Mechanism)*

**Name of the Scheme `** } Reimbursement of 50% share of stipend paid to  
**and** } Graduate/Technician/Technician(Voc) apprentices  
**Periodicity of payment** } Quarterly

**No.**

1) Investor/customer's name : .....

2) Particulars of Bank Account

A Name of the Bank : .....

B Name of the branch : .....

Address : .....

Telephone : .....

C 9-Digit code number of the bank and branch  
 appearing on the MICR cheque issued by the bank: 

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D Type of the account (S.B., Current or Cash Credit)  
 With code (10/11/13) : .....

E Ledger and Ledger folio number : : .....

F Account number (as appearing on the cheque book) : .....

G IFSC code

H MICR code

(In lieu of the bank certificate to be obtained as under, please attach a blank cancelled cheque or photocopy of a cheque or front page of your savings bank passbook issued by your bank for verification of the above particulars)

3) Date of effect:

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all the reasons of incomplete or incorrect information, I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

Signature of the Investor/Customer

Date:

Certified that the particulars furnished above are correct as per our records.

Bank's stamp

Date:

Signature of the authorised official of the Bank