

Advance Salary Form (Updated on 13.01.2023)

(In the case of Online Filling, Press Ctrl + S to save the form & no need for the signature.)

Section 1:

Date:
Employee Name: Employee Code:
Designation: Department:
Date of Joining: Contact No.
Address:
Requested Advance Salary (In INR): In Word (INR):
.....
Reason:
Employee Signature:

- After filling, please send this form to Section 2A (for all staff except HODs) or Section 2B if any HOD is requesting advance.

Section 2A- Concern HOD:

Approved Disapproved
• If disapproved, please give it back to the originator.
• It is certified that the above advance is genuine and verified by me. Said employee has completed six months from joining.
Name: Department:
Signature: Date:
Remark (If any):
.....
Please forward this form to Section 3.

Section 2B- HR Head (For all HODs except self/ACs Head)/ Management (For HR Head/ ACs Head):

Approved Disapproved
• If disapproved, please give it back to the originator.
• It is certified that the above advance is genuine and verified by me. Said employee has completed six months from joining.
Name: Signature: Date:
Remark (If any):
.....
Please forward this form to Section 4.

Section 3- HR Head:

Approved Disapproved

- If disapproved, please give it back to the originator.
- It is certified that the above advance is genuine and verified by me. Said employee has completed six months from joining.

Name: Signature: Date:

Remark (If any):

.....

Please forward this form to Section 4.

Section 4- Accounts Department:

1. Check that the employee has not taken any advance for this year. If the said employee has already taken advance once this year, send this form back to the originator with remarks.
2. The above approved amount is disbursed in the employee account if point 1 doesn't apply.
3. Mark this amount for deduction in next salary.

Name: Signature: Date:

Remark (If any):

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----- End of Form -----