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| H:\IIT Bhubaneswar Logo\IITBhubaneswar_Logo_Pg1.jpg | **भारतीय प्रौद्योगिकी संस्थान भुवनेश्‍वर**  **INDIAN INSTITUTE OF TECHNOLOGY BHUBANESWAR**  **Continuing Education Programme** |

**EXPERT FEE CLAIM FORM**

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| 1. | Name of the Experts:  *External /Internal* |  |
| 2. | Institute, designation and Dept./School:  ***(In case of external expert)*** |  |
| 3. | Designation and Dept./School:  ***(In case of internal expert)*** |  |
| 4. | Beneficiary Name :  ***(As per Bank Account):*** |  |
| 5. | Name and address of the Bank:  ***(A duly signed copy of proof of Bank Passbook needs to be attached)*** |  |
| 6. | Account No.: |  |
| 7. | Name of the Branch: |  |
| 8. | IFSC Code/MICR No.: |  |
| 9. | Swift Code *(in case of foreign expert):* |  |
| 10. | PAN No.: |  |
| 11. | E-mail id : |  |
| 12. | Phone No : |  |
| 13. | Amount Claimed: | Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Expert**