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

**PAYMENT OF EXPERT FEE/SUPPORTING STAFF FEE**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl. No.** | **Name of the Resource Person/Supporting staff** | **Name of the Institute** | **Expert Fee per lecture hour/per session** | **No. of session/lecture hour** | **Total expert fee/Supporting Staff Fee** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  | **Total Amount to be paid** | |  |

***Note: Expert fee/Supporting staff fee will be remitted after deducting TDS as applicable.***

Date: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Course Co-ordinator**

Forwarded by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Head of the School/Department**

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| **FOR OFFICE USE ONLY**   |  |  | | --- | --- | | Fund available after deducting Institute Overhead and GST |  | | Outstanding amount *(if any)* |  | | Amount of total TDS deduction |  | | Net amount to be paid |  |   Special points *(if any)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature of CE Office**  Special points *(if any)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **May be approved.**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Assistant Register(CE)**  **The payment is approved/recommended for Director’s approval.**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Dean (CE)** |