



INSTITUTE OF ENGINEERING & TECHNOLOGY
DEVI AHILYA VISHWAVIDYALAYA, INDORE-452017

Remuneration Bill for Practical Examination

Course:- BE/ME/MSc

Year:- I/II/III/IV

Sem:- A/B

Exam:- April-May/Nov-Dec

Year 20__

Date:-_____

for External Examiner

Please Fill Form in CAPITAL Letters

Full Name Examiner's : Mr./Mrs./Dr. :- _____

Designation :- _____

Address (Cheque to be sent) :- _____

Mobile No. :- _____

Bank Name & Account Number :- _____

(Preferences With Account No. State Bank of India)

Subject Code	Subject Name	Total Candidates	Total Absentees	Candidates Examined	Rate (Rs.) Per Candidate	Total Amount Rs.

for Internal Examiner

Full Name Examiner's : Mr./Mrs./Dr. :- _____

Designation :- _____

Address (Cheque to be sent) :- _____

Mobile No. :- _____

Bank Name & Account Number :- _____

Subject Code	Subject Name	Total Candidates	Total Absentees	Candidates Examined	Rate (Rs.) Per Candidate	Total Amount Rs.

Conveyance Receipt (if applicable) :-

Received an amount of Rs. _____ (Rs. _____ Only) in cash towards conveyance charges for conduction of the Practical Examination for the Subject _____ of the class _____ on date __/__/__

Name of Lab Assistant :- _____ Name of Lab Attendant :- _____

Honorarium Details (in Rs.)

External Examiner :-

Lab Assistant :-

Internal Examiner :-

Lab Attendant :-

Director

Signature
Internal Examiner

Signature
External Examiner

Received	Rs. _____/-	Vide	Cheque	No. _____
Date	____/____/____			

Signature of Claimant
Received Payment

RATE OF REMUNERATION :-

1. B.E. - I, II, III, IV @ Rs. 20/- Per Candidate with Minimum Rs.500/- Only.
2. M.E. - I, II/M.Sc. I, II Year Rs. 20/- Per Candidate with Minimum Rs. 500/- Only.
3. M.E./M.Sc. Dissertation Phase-I & II Rs. 200/- Per Candidate. Min. Rs. 500/- Only,
4. Comprehensive Viva(BE/ME/Msc) Rs. 15 Per Candidate with Min. Rs. 2000/- Only.
5. Remuneration to Class III and IV Employees : Rs. 300/- & Rs. 200/- Per day.



**INSTITUTE OF ENGINEERING & TECHNOLOGY
DEVI AHILYA VISHWAVIDYALAYA, INDORE-452017**

Practical Examination Attendance Sheet

Date: __/__/__

Department: _____

Branch: _____

Class: B.E. (Regular)/ B.E. (P.T.D.C.)/M.E.(Full Time)/M.E. (Part Time)/ M.Sc. Yr.: ____/Sem.: ____

Subject Code: _____ Subject Name: _____

S.No.	Exam Roll No.	Name of Student	Signature
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Name of Internal Examiner : _____ Signature: _____

Name of External Examiner : _____ Signature: _____