



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\_\_\_\_

*for External Examiner*

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

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)

*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	No. of Candidates Registered	No. of Candidates Absent	No. of Candidates Examined	Rate (Rs.) Per Candidate	Total Amount Rs.

CONVEYANCE RECEIPT :-

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 for External Examiner :- \_\_\_\_\_

Honorarium for Internal Examiner :- \_\_\_\_\_

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 Minimum Rs.500/- Only.
2. M.E. - I, II/M.Sc. I, II Year Rs. 20/- Per Candidate Minimum Rs. 500/- Only.
3. M.E. & M.Sc. Dissertation Phase-I & II VIVE VOCE Practical Exam. Rs. 200/- Per Candidate Min. Rs. 500/- Only, Comprehensive Viva Rs. 15/-Per Candidate Min. Rs. 2000/- Only.
4. Remuneration to Class III and IV Employee : Rs. 300/- & Rs. 200/- Per day respectively.



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.: \_\_\_/\_\_\_/\_\_\_

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: \_\_\_\_\_

S.No.	Exam Roll No.	Name of Student	Signature
41			
42			
43			
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Total No. of Students Present : \_\_\_\_\_ Total No. of Students Absent : \_\_\_\_\_

Name of Internal Examiner : \_\_\_\_\_ Signature: \_\_\_\_\_

Name of External Examiner : \_\_\_\_\_ Signature: \_\_\_\_\_