



UNIVERSITY OF CALICUT
(Directorate of Research)

BILL FOR REMUNERATION(Chairman) FOR CONDUCTING Ph.D PQE VIVA-VOCE

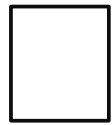
(All relevant columns should be filled properly, otherwise the claim will not be considered)

1.	Name of Examiner & Designation	
2.	Official Address	
3.	Scale of Pay	
4.	Permanent Address with Pin Code, Contact No. & e-mail Id	
5.	Bank A/C No. IFSC Name of Bank [with Branch]	
6.	PAN Number	
7.	Address to which cheque is to be sent	
8.	Remuneration(Chairman) for conducting Ph.D PQE Viva-Voce	Rs. (Rupees.....only)

CERTIFICATE

Certified that the amount claimed in this bill has not been claimed previously and it is paid to me provisionally and I shall refund to the University any amount received, which is subsequently disallowed by Audit.

Contents received:



Signature of the Examiner(Chairman) with date:

Certified that Dr..... has conducted Ph.D PQE Viva-Voce in respect of the candidate Mr./Ms..... on..... as per the letter No..... dated.....

Signature :

Name & Designation :

Head, Dept. of

(For Office Use Only)

Passed for payment of Rs..... (Rupees.....only)

Assistant

Section Officer

Assistant Registrar

Director/DR