

SHRI G. S. INSTITUTE OF TECHNOLOGY & SCIENCE, INDORE (M.P.) -3
(An Autonomous Institute)

FOR P.G. THESIS VIVA-VOCE

REMUNERATION BILL

Month : _____ Year: _____ Exam: M.E/M.Tech/ M.Pharm./M.Sc. (Please tick)

Name in full : _____

Designation & Full address/ : _____

Employee No. (For Internal) : _____

For External please fill the following information for transfer of TA/DA & Remuneration

Bank Name	Branch & Address	Account Number	IFSC code of the Bank

Telephone No. /Mobile No. : _____

Subject Code & Nomenclature	Name(s) of candidates examined	Total Amount in Rupees
	1. _____	
	2. _____	

I hereby declare that I have completed the work entrusted to me as examiner for the above examination as per the rules and submitted the marks foil/counterfoil to the controller (Exam) office on _____

**Signature of
Internal Examiner**

**Signature of
Head of the Department**

**Signature of
External Examiner**

Finance Officer

Director's Nominee

Director

M.E. / M.TECH / M.PHARM / M.Sc.: Reading Thesis including Viva-voce exam of thesis Rs. 1000/- per candidate (With a maximum of Rs 2000/-per day per examiner).

Ph.D:

- I. Reading a thesis for Ph.D Rs. 2500/-
- II. Practical and viva-voce examination for Ph.D. Rs 2000/-

ADVANCED RECIEPT (FOR EXTERNAL EXAMINER ONLY)

Received with thanks a Sum of Rs. _____ (Rs. _____ only)
from the Director, Shri G.S.I.T.S., Indore towards the payment of TA/DA & remuneration for the conduction of PG Thesis Viva-Voce Exam.

SIGNATURE OF THE EXTERNAL EXAMINER

Following information is needed in case of External examiners for transfer of TA/DA & Remuneration

Bank Name	Branch & Address	Account Number	IFSC code of the Bank

Telephone No. /Mobile No. : _____

Signature of Examiner

(For Examination office use)		
Passed Rs.....only & entered in Exam Payment Register Page no/Sr. No.....		
Account clerk		Controller(Exams)
(For Account section use)		
Net Payment made after deduction of Teacher's Welfare Fund Rs.....		
Finance Officer	Internal Auditor	Cashier