

Bill of Honorarium for Guest/ Visiting Faculty / Expert / Craftsman

Date: _____

I. Please carefully enter all the details of Bank A/c below for payment through electronic transfer:

S. No.	Requisite	Details
1	Beneficiary Name	
2	Name of the Bank	
3	Address of the Bank Branch	
4	Bank Account Number	
5	IFSC Code	
6	PAN Card Number	
7	Email ID and Contact number	

Signature of the Guest/ Visiting Faculty / Expert / Craftsman

II. Please fill the details of the course below:

S. No	Requisite	Details	
1	Discipline		
2	Semester		
3	Course Name		
4	Course Code		
5	Course Mode (Please ✓)	Offline <input type="checkbox"/>	Online <input type="checkbox"/>

III. Details of the duration Spent by the Guest/ Visiting Faculty / Expert / Craftsman for the course delivery:

S. No.	Date	Day of the Week (For Example: Mon/Tue...)	Full day/ Half-Day	Start Time	End time	Total Duration In Hours

It is certified that the information filled in Table II and Table III is true, correct and verified.

Name & Signature of Course Lead

Name & Signature of Discipline Lead