|  |  |  |
| --- | --- | --- |
|  | **ia- }kjdk izlkn feJ****Hkkjrh; lwpuk izkS|kSfxdh]** **vfHkdYiu ,oa fofuekZ.k laLFkku, tcyiqj****¼lalnh; vf/kfu;e }kjk LFkkfir jk"Vªh; egRo dk laLFkku½** | **Pt. Dwarka Prasad Mishra****Indian Institute of Information Technology,****Design & Manufacturing, Jabalpur****(An Institute of National Importance established by an Act of Parliament)** |

 Office of Research, Sponsored Projects and Consultancy

**Honorarium proposal form for student/staff/intern**

**Instructions for PI:**

1. Use separate forms for recommending honorarium proposals from different projects/ consultancy.
2. Honorarium can be accumulated for a period of three months.
3. **The honorarium proposal will be processed within three months from the last month of the proposed period.**

|  |  |  |
| --- | --- | --- |
| 1 |  Name of the Staff/ Student/ Intern: |  |
| 2 |  Staff PF No./ Student Roll Number:  (Ph.D./ Master’s/ Undergraduate) |  |
| 3 |  Section/Discipline: |  |
| 4 | 1. Project No./ Consultancy No.:

 Title:1. Workshop/ Short term program details

 Title: Name of PI/ Convener/Coordinator: |   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|   5 |   Budget Head  Honorarium is to be paid   |  Manpower / Contingency/ Remuneration / Honorarium /  Technical Assistance / Consultancy Charges / any other  relevant head  If any other, pls. specify the B/H, ……..…………  |
| 6 |  Honorarium recommended for payment: |  Financial year:  |
| Month of Work: |
|  Rate (as proposed in the approval form):  |
|  No. of Hours:  |
|  Amount (Rs.) in Figures:  |
|  Amount (Rs.) in Words:  |
| 7 |  Specify work(s) performed by the Staff/Student, justifying the proposed  honorarium under the above project |  |

It is certified that Mr./Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has spent adequate time and efforts on the project/consultancy activities as specified enclosed declaration form without affecting his/her assigned duties of the section /studies.

Approval to engage Staff/ Student/ Intern attached: Yes/ No

**Proposed and Recommended by**

|  |  |  |
| --- | --- | --- |
|  | **Signature of PI/CI** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Name of PI/CI** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Head of Discipline**

(of Staff/ Student engaged for the work)

**Date:**

**Internal Audit**

**Dealing Asstt. AR (IA)**

**Approved/Not Approved**

**Director/Dean (RSPC)**

**Self-Declaration**

1. I have not received any amount for any other project for the same duration.

or

I have received ……………………………… amount from other project but this amount does not exceed the upper limit of the total honorarium received in a financial year.

1. I declare that academic and research work was not affected due to the work done towards the project.

Signature of the Claimant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Staff/Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

P.F. No./Roll No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Bank Account Details:**

Name of Bank Account Holder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Account Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IFSC Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Branch Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_