|  |  |  |
| --- | --- | --- |
|  | **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:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_