



पं. द्वारका प्रसाद मिश्र
भारतीय सूचना प्रौद्योगिकी,
अभिकल्पन एवं विनिर्माण संस्थान, जबलपुर
(संसदीय अधिनियम द्वारा स्थापित राष्ट्रीय महत्व का
संस्थान)

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	(a). Project No./ Consultancy No.: Title: (b). 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.

2. 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: _____