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| --- | --- |
| 1. | Name of Examiner (in **block letters**):-------------------------------------------------------------------------------------------------------------------------------- |
| 2. | Account Details | **:** | **Information required for making payment.**Name of Account Holder:Account Number: Bank Name :Branch Name:IFS / Swift / BI Code: |
| 3. | Contact Number | **:** |  |
| 4. | Email  | **:** |  |
| 5.  | Assignment | **:** |  |
| 6. | S.N. | Particulars | Remuneration | Total Amount |
| 1 | U.G/P.G. Thesis/Project Evaluation |  |  |
| In Words: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | ***Rate of Remuneration***

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| **A.** | **M.E/M.Pharm/M.Tech Thesis***(Or a thesis equivalent to 4 or more credit evaluation and viva-voce examination)* | ₹ 500 per thesis per external examiner and/or a maximum of ₹ 5000 per examiner per day |
| **B.** | **MBA/MCA/M.Tech/M.Sc. Project***(Or a project thesis less than 3 credits)* | ₹ 50 per candidate or a minimum of ₹ 750 per examiner per day and/or a maximum of ₹ 3000 per examiner per day |
| **C.** | **U.G. Project Viva-Voce Exam** | ₹ 2500 to external examiner per day |

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| 7. | Complete Mailing/Postal Address (If required): |
| PIN/ZIP Code: Country: Mobile/Contact: |

 ***Signature of Examiner Signature of HOD***

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| ***For Office Use Only*** |

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| ToAccount SectionBIT MesraKindly pay an amount of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the examiner though DD/ cheque/ account transfer. ***Controller of Examination*** |