Sikkim University Finance Department Bill of Guest/Visiting Faculty for the period ______ to _____

- 1. Name of the Guest/Visiting Faculty (in block letter) :
- 2. Department in which lectures delivered
- 3. Reference to appointment order issued by Registrar :
- 4. Number of classes taken*

Sl. No.	Name of the Department	No. of Classes Taken		
	Total No. of Classes			

5.	Bank Name	:
6.	Bank Account number	:
7.	IFS Code	:
8.	* PAN	:

Date:

Signature of the Guest/Visiting Faculty with date

•

Office Use									
Verified	the	records	and	authorized	payment	of	(Rupees		
					_) by cred	lit to	bank account of the		
payee.									

Expenditure debitable to : 16004 : Payment to Guest/Visiting Faculty account.

Drawing and Disbursing Officer

*Note: (i) If the Guest/Visiting Faculty are taking classes in more than one department in a particular month then they are requested to submit the bills for the classes for that particular month for all the departments at one time.

(v) PAN number mentioned above is mandatory.

⁽ii) All the Guest/Visiting Faculties are requested to submit the bills latest by 7th of every month and there should be only one bill for one month.

⁽iii) The details of the classes taken needs to be updated and certified by the each HOD in the Annexure A attached.

⁽iv) In case if you are a Sikkim Subject holder, please enclose self certified copy of your COI.

Annexure A

Recommendation of Head/in charge of the Department

	Mrs./Dr./P							
delivered		number	of	lectures	in	the	Department	of
				during the p	eriod		to	_·
Remuner	ation	payable		is		1 /	to(Rupe	es
)@10	000 per	lecture.		_
SI No		Doto/	or.		, T	Time	No of alagaa	a Totol
Sl. No.		Date/I	Jay			1 ime	No. of classes	s Total
								<u> </u>
								<u> </u>
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					1		1	

Signature of the HOD: Seal

Date: