



Kolhapur Institute of Technology's
COLLEGE OF ENGINEERING (Autonomous), KOLHAPUR

FORM No. E-07

Phone No. 77699601199, 9168781199-; Fax: 0231-2638881

Website: <http://www.kitcoek.in> Email: examcell@kitcoek.in & info@kitcoek.in

REMUNERATION BILL

(ESE / Makeup / Reval)

Faculty Name: ----- Mobile No: -----

College/ University Name & Department: -----

Class & Program Name: ----- Semester: -----

Course Name & Course Code: -----

Ref. No / Order No & Date: -----

Details of remuneration:

Sr. No	Description	Amount (Rs.)
1	Paper Setting, Scheme of marking and model Answers Number of section/ sets: _____ Rate(Rs.) _____ Per Section/set	
2	1 st Evaluation/ Moderation / Revaluation Number of answers script : _____ Rate(Rs.) _____ Per Answers script	
3	Practical / Oral/ Mini Project/ Project / seminar / Dissertations: Number of students: _____ Rate (Rs.) _____ Per Student.	
4	Minimum Remuneration	
5	Chairman Allowance	
Total (Rupees: _____): Total		

Claimant's
Sign

Dy. Registrar
(E & E)

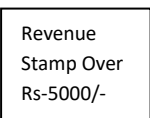
Dean
(E & E)

Director

Account Head: Remuneration (Exam Cell- Autonomous)

Received Rs. -----

Passed for Rs. -----



(Signature & Date)

Accountant

[Bank Details]

Bank Name & Branch Name:	Bank A/C No:	IFSC No:
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