

SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

BILL FOR PAYMENT OF REMUNERATION FOR EVALUATION BY FACULTY (PART TIME)

Name of the Examination:							
Year and session :							
Name of Faculty member:							
Department:							
Nature of appointment: (a) Lecture basis (b) Consolidated salary but relieved on _____							
PHONE NO:							
Bank Account No:							
IFSC CODE:							
BANK NAME AND BRANCH :							
S NO	COURSE/ BRANCH	SEMESTER	SUBJECT NAME	SUBJECT CODE	REGULAR/ REAPPEAR	NUMBER OF ANSWERSHEETS EVALUATED	Remuneration
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
TOTAL AMOUNT CLAIMED							

Date of submission: _____

I/C Evaluation

HOD

Signature of Faculty

PRE RECEIPT

Received a sum of Rs _____ (in words _____) from the Controller of Examination, SBSSTC, Ferozepur on account of remuneration for evaluation as mentioned above.

It is also certified that undersigned will deposit the income tax on account of income received for the above said purpose.

Signature of Faculty member with date

SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

BILL FOR PAYMENT OF REMUNERATION FOR INVIGILATION DUTIES BY FACULTY (PART TIME)

Name of the Examination:							
Year and session :							
Name of Faculty member:							
Department:							
Nature of appointment: (a) Lecture basis (b) Consolidated salary but relieved on _____							
PHONE NO:							
Bank Account No:							
IFSC CODE:							
BANK NAME AND BRANCH :							
S NO	DATE	SESSION	SUBJECT NAME	SUBJECT CODE	COURSE/ BRANCH	SEMESTER	Remuneration
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
TOTAL AMOUNT CLAIMED							

Date of submission: _____

I/c Conduct/ Supdtt.

HOD

Signature of Faculty

PRE RECEIPT

Received a sum of Rs _____ (in words _____)
from the Controller of Examination, SBSSTC, Ferozepur on account of remuneration for
Invigilation duties as mentioned above.

It is also certified that undersigned will deposit the income tax on account of income received
for the above said purpose.

Signature of Faculty member with date

SHAHEED BHAGAT SINGH STATE UNIVERSITY, FEROZEPUR

BILL FOR PAYMENT OF REMUNERATION FOR QUESTION PAPER SETTING BY FACULTY (PART TIME)

Name of the Examination:						
Year and session :						
Name of Faculty member:						
Department:						
Nature of appointment: (a) Lecture basis (b) Consolidated salary but relieved on _____						
PHONE NO:						
Bank Account No:						
IFSC CODE:						
BANK NAME AND BRANCH :						
S NO	COURSE/ BRANCH	SEMESTER	REGULAR/REAPPEAR	SUBJECT CODE	SUBJECT NAME	Remuneration
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
TOTAL AMOUNT CLAIMED						

Date of submission: _____

I/c Conduct

HOD

Signature of Faculty

PRE RECEIPT

Received a sum of Rs _____ (in words _____)
from the Controller of Examination, SBSSTC, Ferozpur on account of remuneration for question
paper setting as mentioned above.

It is also certified that undersigned will deposit the income tax on account of income received
for the above said purpose.

Signature of Faculty member with date