



CENTER FOR CONTINUING EDUCATION NATIONAL INSTITUTE OF TECHNOLOGY

WARANGAL-506004 TELANGANA STATE-INDIA

HONORARIUM FOR SHORT TERM COURSE/FDP/SEMINAR/WORKSHOP

[To be filled and signed by Resource Person only]

1. General Details

1.	Name	
2.	Designation	
3.	Mobile Number	
4.	E-Mail id	
5.	Pan Card Number	
6.	Name of the Organization	
7.	Account Details	Name : Account No : Bank : Branch : IFSC Code :
8.	Sessions Details	1. 2. 3.
9.	Total Number of Hours	
10.	Accommodation Details	NIL

2. Travel Details

S.No	Date	Departure	Arrival	Type	Amount
			NIL		

3. Honorarium+Travel+Accommodation

S.No	Honorarium Details	Travel Details	Accommodation Details	Total amount

I hereby certify that the particulars provided here with are true and correct according to my knowledge.

Signature of Faculty

Signature of Coordinator

Received Honorarium of Rs.....Rupees.....

Signature of Faculty In-charge CCE

Accounts officer