



G.S. Mandal's

MAHARASHTRA INSTITUTE OF TECHNOLOGY, AURANGABAD

(An Autonomous Institute, Accredited with Grade 'A' by NAAC)

FORM NO.C-03

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Examination Cell

Ref.No.MITA/EXAMCELL/2022/

Date:

REMUNERATION BILL**(ESE/Makeup/Reval./Other)**

Faculty Name:..... Mobile No:.....

Name of Programme:

Class:.....Semester:- I/ II

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/Minor Project/Project/seminar /Dissertations SIP/IPT/other: Number of students:.....Rate(Rs.).....Per Student.	
4	Minimum Remuneration	
5	Chairman Allowance if applicable	
Total (Rupees:.....):		Total

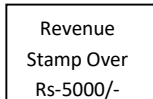
**Applicant
Signature****Clerk****Asso. Dean (E&E)****Dean (E&E)****Director**

Account Head: Remuneration (Examination Cell-Autonomous)

(... %) Deduction Rs.-----

Passed for Rs. -----

Received Rs. -----



(Signature & Date)

Accountant

[Bank Details]

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