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VISVESVARAYA NATIONAL INSTITUTE OF TECHNOLOGY, NAGPUR – 440 010

Format for claiming Visit Charges as part of Consultancy Projects

(Ref : Circular No. Admin/3500 dated 28-6-2019)

Name of the coordinator/ faculty:

Designation:

Department:

S No.	Date	Time		Place of Visit	Purpose	* Amount (in Rs.)
		From	To			
					TOTAL	

(*Ceiling limits of charges per visit are Rs.2000 /- for faculty, Rs.500 /- for Gr-C and Rs.300 /- for supporting staff, as per Circular No.D/6769 dated 21-10-2010)

I hereby certify that the above information is true and correct to the best of my knowledge and belief.

Signature of Coordinator

Head of Department

ONLY FOR OFFICE USE
(Endorsement by Estt Section)

(Note: 1. Use separate form for each faculty/ coordinator.

2. This format is to be enclosed as part of Consutancy bill for submission to Accounts, only after obtaining due endorsement from Estt Section)