



BEANT COLLEGE OF ENGINEERING AND TECHNOLOGY, GURDASPUR

**Technical Education Quality Improvement Programme (TEQIP – II)
Claim of Expenses under Faculty qualification upgradation**

Name of Faculty _____ Designation _____

Department _____ Date of Joining _____

Present Qualification: _____ Degree for which enrolled: _____

Specialization _____ University/Institute _____

Date of Enrollment _____ NOC received from college (Y/N) _____ (If yes, attach copy of permission)

Amount _____ spent on account of : Fee Charged by university (course work/ annual fee/semester fee/ thesis submission fee). Pl. mention clearly

_____ Fee charged for use of research facilities _____

Any other _____

(pl. submit fee receipt duly attested by faculty member)

Date of deposit _____

I undertake that in case of any audit objection, I shall refund the claimed amount.

Signature of Faculty Member

Recommended and forwarded

Signature of HOD

| | |
|---|---|
| Category of Expenditure (Put Tick in one Box) To be filled Nodal Officer(Academic Activities) (TEQIP – II) | <input type="checkbox"/> Enhancement of R & D and institutional consultancy activities <input type="checkbox"/> Faculty and Staff Development for improved competence based on TNA <input type="checkbox"/> Enhanced interaction with industry <input type="checkbox"/> Institutional Management Capacity Enhancement <input type="checkbox"/> Implementation of Institutional Reforms <input type="checkbox"/> Academic Support for Weak Students |
| Forwarded and Recommended | |
| Signature of Nodal Officer (Academic Activities), TEQIP - II | |
| Signature of the Co-coordinator (TEQIP – II) | Approved / Not Approved Signature (with seal) of the Principal of BCET, Gurdaspur |

Budgetary provision checked. Please release the payment.

Nodal office (Finance)

Received Rs. _____ vide Cheque No. _____ dated _____.

Signature of the faculty/staff with date and designation