POST GRADUATE PROGRAMME IN INDUSTRIAL ENGINEERING/INDUSTRIAL MANAGEMENT/INDUSTRIAL SAFETY & ENVIRONMENTAL MANAGEMENT

GUEST FACULTY FORM

Year	First	Second	Section	Α	В
Quarter/Semester No.					
Name of Course :					
Elective/Compulsory					

Strike off whichever is not applicable. Director's sanction is requested for following Guest Speakers my above course.

SI. No.	Name & full Address of the Guest Faculty	Topic	Date	Duration		Honora- rium (Rs.)	Trans- port Allow- ance, if any(Rs.)	Total (Rs.)
				Sessions	Hrs			

	Signature:Name of Faculty:
DEAN (ACAD. AFFAIRS)	Date :

NOTE: This form be submitted in Quadruplicate

Distribution:

Original : A.R. (Acd) Duplicate : DR (Acts.)

Triplicate : Faculty Member concerned. The faculty is requested to inform AR (Acd.) as soon as

Guest Faculty completes his/her section

Quadruplicate: PGPC