



Joint Training Program
for teachers in AICTE's approved technical institutions
 FORMAT FOR STATEMENT OF EXPENDITURE

AICTE File No. :

Title of the Programme :

Name of the Coordinator :

<u>Sanction No. and Date</u>	<u>Grant Sanctioned</u>	<u>Details of expenditure Incurred Item wise</u>	<u>Amount Rs. (each head in AICTE Share)</u>	<u>Amount Rs. (each head in University Share)</u>	<u>No.of Participants</u>	<u>Duration of the Programme (with dates)</u>
		1. Boarding and lodging to the participants 2. T.A to outstation Participants 3. Honorarium to Course Co-ordinator (not exceed 1% of Total expenditure incurred) 4. Reading materials to Participants 5. Honorarium to Resource Persons (not exceed 20% of Total expenditure incurred) 6. TA/DA to Resource Persons 7. Working Expenses (reprographic services, services, postage, transport daily wages, tea/coffee etc)				
		Total				
		Grant Received				
		Balance to be Received				

(1) _____
Name and Signature of Coordinator
with Seal

(2) _____
Name and Signature of
Head of Institution with Seal

(3) Signature (with Seal) of the Finance Officer/
Auditor/Accounts Officer
(If it is Govt./Govt. Aided Institute)

(4) Signature of Chartered Accountant:
Name of Chartered Accountant:
Membership No:
Rubber stamp:
Full Address:
Date:

Note:-If it is more than one page, each page must be signed in all annexure



NAME & ADDRESS OF THE INSTITUTE.....

UTILIZATION CERTIFICATE FOR THE FINANCIAL YEAR.....

Name of the Scheme under which Grant was sanctioned: **Joint Training Program**
for teachers in AICTE's approved technical institutions

(to be submitted separately for each sanction order)

AICTE File No. :

Name of Co-ordinator :

Dates of the Programme :

Title of the Joint Training Program :

Sl. No.	AICTE Sanction Order/Letter No. & Date under which grant was sanctioned	Amount (Rs.)	
1.	_____	_____	Certified that out of the grant-in-aid of Rs. _____ (in words) sanctioned by the AICTE during the financial year _____ in favour of _____ (name of the institute) as per letter mentioned in the margin, Rs. ___ on account of unspent balance of previous year, Rs. ___ on account of other income / receipts, a sum of Rs. ___ has been utilized for the purpose for which it was sanctioned and the balance of Rs. ___ remained unutilized at the end of the year.

Certified that I have satisfied myself that the conditions on which the grant-in-aid was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

Kinds of checks exercised: -

- Audited Annual Accounts of the Institute
- Receipt and Payment account
- Periodical Progress Reports.

(1). Name, Signature & Address of the Claimant/Awardee/Coordinator with seal:

2). Signature of Chartered Accountant:

- Name of Chartered Accountant:
- Membership No:
- Rubber stamp:
- Full Address:
- Date:

(3). Signature of Head of the Institute:

- Name & Designation of the Head of Institute:
- Rubber stamp:
- Full Address:
- Date:

(4). Signature of the Finance Officer/Accounts Officer:

Name of the Finance Officer/Accounts Officer:

(If it is Govt./Govt. Aided Institute)

Note:-If it is more than one page, each page must be signed in all annexure



SHORT TERM TRAINING PROGRAMME UNDER TU SCHEME

FEED BACK FORM

1. AICTE File No. & Date of Offer Letter :

2. Name of the Coordinator :

3. Name and Address of the Institution :

4. Title of the Faculty Development Programme :

5. Dates :

6. Venue :

7. Total No. of participants proposed and actually attended

Proposed

Attended

8. No. and date of the offer letter

Letter No.	Date

9. Total amount sanctioned :Rs.

10. No. and date of Sanction letter:

Letter No.	Date	Grant Released

11. Total expenditure incurred in Conducting the Faculty Development Programme: Rs.

12. Grant received from various agencies other than AICTE for this Faculty Development Programme

Sl. No.	Name of Agency	Grant Received
	Total	

13. Details of internal revenue if any generated by the Institution/Department on account of this Programme:

14. Briefly mention about the technological/ academic/or any other benefit generated by conducting this programme with respect to a) the institution, b) the faculty; c) students; d) industry/society.

15. The soft as well as hard copy of the detailed study material/proceedings of the programme must be furnished to the Council.



Name & Signature of Coordinator

**Name & Signature of Head of Institute
with seal**