(Approval Number: JEC-TEQIP/		/)
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## FORM 3

Application for Temporary Advance to organize Event under	r TEOI	P III
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1. Nature of Event:						
2. Name /Title of the Event :						
2						
4. Duration in days :						
Proposed Date: From:		to _				
5. Details of the Faculty Auth	orized to rec	eive the amoun	t:			
Name:						
Department:		Designation	on:			
Employee ID:		Email ID:				
Office Phone:		Mobile Ph	none:			
6. Temporary Advance to be	Drawn (In	₹				
1 Day Event 2	Days Event	3 Days Event	4 Days Event	5 Days Event		
Note: The final settlement shoul the TEQIP event.	d be submitted	l within a period of	<b>2weeks</b> from the d	ate of completion of	F	
Signature of Faculty/Staff	Signatu	Signature of HOD/HOC Signature of Coordinator (Academic)			Academic)	
Name):	Name:	Name: Name:		Name:		
Date:	Date: _		Date:			
		OFFICE USE				
Forwarded to Principal for approval of Rs.	f temporary ac	lvance of	Approved /	Not Approved		
Coordinator, (Finance) JEC-TEQIP	Coordinator, JEC-TEQIP Principal, Jorhat Engineering College		ollege			