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| **COEP TECHNOLOGICAL UNIVERSITY PUNE****(A Unitary Public University of Govt of Maharashtra)****Consultancy Assignment Approval**  |  |

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| **CW No.** :  | Date: |   |
| Name of the Client:Address:State: |
| Consultancy: Type 1 or Type 2  |  |
| Brief Description of Work /**Contract letter to attach** |  |
| Name of the faculty being engaged in the work / Dept. ( P.I.)% distribution in case of group consultancy ( Co-PI) |   |
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| Justification as to why this consultancy work should be allotted to the faculty/ Justify use of consultancy work to academics  |    |
| How many consultancy works are presently being carried out by the faculty – mention number : |  |
| Total consultancy fee, INR | **Basic fee, INR**  | **GST 18 % , INR**  | **Total , INR** |
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| Total INR. (in words):  |
| Teaching load of faculty, Hrs/Week |   |
| Total man-hours required to complete the work |  |
| Time required to complete the work: days/ week  |  |
| **Mandatory to include participation of bonafide Students / Research Scholars (on hourly basis as per Rules of Consultancy)**  |  |
| Proposed date for commencement of work |  |
| Proposed date of completion |  |
| ***Undertaking***I, I \_ I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am aware that I will be available during working time in the University foracademic work and I will not spend more than 52 days over the weekends in a year for consultancy work. I shall submit completion report having reference number assigned to each of the assignment/ consultancy work.Date: Signature: concerned Faculty (Sign of P.I. ) |
| **Approval by HOD**Remark: Date : Signature and Stamp  | **Approval by Director (R I I L)** Remark:Date: Signature |
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| **FOR FINANCE DEPT** (Faculty to submit Client details with Proof of GST certificate, photocopy of Pancard, client letter)  |
| **PROFORMA RELEASE DATE & NO:**  |
| **GSTN: PAN number: TAN number:**  |
| **Authorized Signatory from finance Dept.** |