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| ***INDIAN INSTITUTE OF TECHNOLOGY INDORE*** | | | | | | | | | | | | | | | | | |
| ***COSTING OF CEP FORM I*** | | | | | | | | | | | | | | | | | |
| ***S.N.*** | ***Particulars*** | | | | ***Details*** | | | | | | | | | | | | |
| *1* | **Name Of Coordinator(s)** | | | |  | | | | | | | | | | | | |
| *2* | **Employee ID No. & EPBX No.** | | | | **ID No** | | | | | **Internal Ph. No** | | | | | | | |
| *3* | **Category Of Course (Tick whichever is applicable)** | | | | **Open** | |  | | | **In House** | | | | |  | | |
| *4* | **If specific agreement/MOU is required, attach draft** | | | | | | | | |  | | | | | | | |
| *5* | **Course Title** | | | |  |  | | |  | |  | | | | |  |  |
| *6* | **Duration of the Course with dates** | | | |  |  | | |  | |  | | | | |  |  |
| *7* | **Number of Participants** | | | |  | | | | | | | | | | | | |
| *8* | **Fee to be Charged** | | | |  | | | | | | | | | | | | |
| *9* | **If lower fee is charged than the CEP Norms, provide justification:** | | | | | | | | | | | |  |  | | | |
|  |
|  | ***Costing Details*** | | | | | | | | | | | | | ***Amount*** | | | |
| A | **Total Course Revenue (Excluding Service Tax)** | | | | | | | | | | | | |  | | | |
| B | **Proposed Expenditure** | | | | | | | ***Amount*** | | | | | |  | | | |
| **a** | **Institute Over Heads (30% of A)** | | | | | |  | | | | | |
| **b** | **Printing & Stationary** | | | | | |  | | | | | |
| **c** | **Lodging & Boarding** | | | | | |  | | | | | |
| **d** | **Transportation** | | | | | |  | | | | | |
| **e** | **Consumables** | | | | | |  | | | | | |
| **f** | **Books** | | | | | |  | | | | | |
| **g** | **Equipment** | | | | | |  | | | | | |
| **h** | **Others (mention type of Expenditure)** | | | | | |  | | | |  | |
| **i** | **Teaching Honorarium**  **No. of Lectures**  **Rate Per Lecture `** | | | | | |  | | | | | |
| **j** | **Coordinator's Honorarium (mention ratio of division if more than one co-ordinator - limited to 10% of A)** | | | | | |  | | | | | |
| **k** | **Others (Mention type of Expenditure)** | | | | | |  | | | | | |
|  | **Total (B) should be equal to A** | | | | | | | | | | | |  | | | |
|  | I/We undertake that the material presented as part of the course will be original of all the instructors/book authors/organisations/publishers/web administrators, etc. | | | | | | | | | | | | | | | | |
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|  |  | |  |  |  |  | | |  | | |  | | | |  |  |
|  |  | |  |  |  | **Signature of Coordinator with date** | | | | | | | | | | | |
|  | **FOR USE OF DEAN R & D OFFICE** | | | | | | | | | | | | | | | | |
|  | **Approved/Disapproved** (tick whichever is applicable) | | | |  |  | | |  | | |  | | | |  |  |
|  | **If approved allotted CEP No.** | | | |  | | | | | | | | | | | | |
|  |  | |  |  |  |  | | |  | | |  | | | |  |  |
|  |  | |  |  |  | **Signature of Dean R&D with date** | | | | | | | | | | | |