

BILL FORM FOR EXTERNAL/INTERNAL EXAMINER FOR PRACTICAL EXAMINER

- 1 Identity No. Name of Subject _____
- 2 Examination held in _____
- 3 Name of External/Internal Examiner/Lab Attendant _____
- 4 Designation with complete official address _____

- 5 Whether Govt./Non-Govt./Aided Employee _____
- 6 If Govt. Employee state whether Gazetted _____
or Non-Gazetted _____
- 7 Particular of practical Exam conducted (Given Below) _____

Sr. No	Date	Shift	Sem/Dicipline	No. of Students	Rate	Amount	Remarks (if any)

It is certified That

I have not claimed that the above mentioned payment in respect of above mentioned practical examination in any other bill.

(Signature of the Examiner)

Verified by the Internal Examiner

It is certified that all the above information given by the External examiner is correct

(Signature of Internal Examiner)

(With Designation & official address)

(Counters signed by HOD)