**RAJIV GANDHI CENTRE FOR BIOTECHNOLOGY**  
 **Office of Academic Affairs**

**Honorarium Request Form – DAC/SAC/SRF Meetings**

1. **Name of the Student:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Name of the Supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Name of the Laboratory:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Date of DAC/SAC/SRF Conducted:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Number of DAC/SAC Conducted (till date):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. **Amount Paid as Honorarium at RGCB Cash Counter:** ₹\_\_\_\_\_\_\_\_\_\_
7. **Receipt No. and Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. **Name and Address of the External Expert(s):**

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1. **Bank Account Details of the External Expert(s):**
   * Account Holder’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Bank Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * IFSC Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Source of Fund (Please √ as applicable):

🞎 CSIR 🞎 UGC 🞎 DBT 🞎 ICMR 🞎 DST-INSPIRE 🞎 Faculty SPDF/PROJECT

**Instructions:**

* *If CSIR/UGC- Please submit the copy of fee remitted at RGCB cash counter to OAA along with the DAC reports.*
* *IF DBT/ /ICMR /DST-INSPIRE/Faculty SPDF/PROJECT -Please generate the request through S-FACTS and submit the copy of the request to OAA along with the DAC reports.*

**Signature of the Student:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Forwarded by Supervisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_