

Tel: +91 877 250 3531

ACADEMIC SECTION

Email: academics@iittp.ac.in

GUEST FACULTY FORM

Part-A (to be submitted along with teaching load)

1. Department	:				
2. Guest Faculty Details	:	Name	Affiliation		
3. Semester	:	From (month, year)	To (month, year)		
4. Course Details	:	Code	Title	L-T-P-C	Credits to be taught
5. Estimated Budget (to be filled by the Department)	:	Approximate Number of Students	TA Estimate (Attach details)		

6.	Recommended Head of the Department	Recommended Advisor, Academic Courses	Approved Dean, Academics Affairs
After approval of Dean, Academic Affairs, a copy will be kept in Guest Faculty file and return the original to the department			

PART-B (to be submitted along with CCM minutes)

7. Name on the account		8. PAN	
9. IFSC/SWIFT Code	10. A/c Number	11. Signature of Guest Faculty	

12. The instructor has taught _____ credits and submitted the grades to the class committee. The department did not pay the instructor for this work from any other source. Honorarium may be released.

Date	Head of the Department
-------------	-------------------------------

PART-C (to be filled by Academic Section)

13. List date and amount for all TA claims (this form should be processed only after all the TA claims are submitted).

14.	Total registered students	Total honorarium payable (₹)
-----	---------------------------	------------------------------

15. Honorarium as above may be paid from Account			
Prepared by JA/JS, Academics	Details verified AR/DR, Academics	Recommended Advisor, Academic Courses	Approved Dean, Academic Affairs