

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN**FORM FOR APPROVAL OF CONSULTANCY PROJECT**

1. Name of the Department

2. Title of the Project

3. Sponsor's Name and Address

4. Type of Sponsorship : Private Sector/Govt. Sector/Public Sector Foreign Agency Others (Please Specify)

5. Payment to be received in : FULL Indian CURRENCY PART Foreign Currency

6. (i) Date of Commencement (ii) Expected Date of Completion

7. Whether MoU / Agreement Signed with Agency: Signed /Not Signed

8. Details of Staff involved:

Name of Investigator(s) with Employee No	Department	Brief Role as Expert or Member	Man-days	Signature
(P.I.)				

ATTACH ANOTHER SHEET GIVING DETAILS - (i) SN (ii) NAME (iii) CAPACITY i.e - P.I/EXPERT/MEMBER (iv) DETAILS TASKS AND RESPONSIBILITIES FOR WHICH ACCOUNTABLE (v) TENTATIVE MAN-DAYS (vi) AGREED MINIMUM HOURLY REMUNERATION (IF PROFITABLE) (vi) SIGNATURE

Technical Staff (only regular Staff) with Employee No.	Brief Role	Technical Staff (only regular Staff) with Employee No.	Brief Role

9. Budget (should conform to the amount of contract/agreement with the sponsor)

Budget Head / Description	Budgeted Amount	Present Allocation (only in case of Part Payment)
1. Gross Amount including Service Tax		
2. Less- Service Tax		
3. Contracted Amount		
4. University Share (35% of Contracted Amount)		
5. Expenditure (Estimated*)		
6. Honorarium (Estimated)		

* ATTACH SEPARATE SHEET GIVING COMPLETE TENTATIVE DETAILS of the amount to be used by the PI for cost of Material, Contingency/Misc., Travel, Work-hire, Consultant, Research Project Staff etc.

Correspondence with sponsor attached : request from sponsor offer from PI response from Sponsor

Recommended

Signature of Head of the Deptt/Centre (with date & stamp)

Signature of the Principal Investigator (with date)

Dean (IRD) Office, IGDTUW

Project No:

Dated:

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

2. Head of the Department

FOR USE BY DEAN (IRD) ACCOUNTS OFFICE

PROJECT NO. _____

University Share to be deducted

35% of the Contracted Amount

Note:

1. In case of part payment by the Agency, the University Share will be deducted on contracted part of each installment.
2. The University Share will be distributed amongst RDF (RC Fund), PDF and incentive to staff etc. on getting full payment and at the time of closing the project only.

CONTRACTED AMOUNT	SERVICE TAX		% of UNIVERSITY SHARE		DEALING ASSTT.	REGISTRAR
	12.36%	Total				
			35%			

Service Tax : Rs.

University Share : Rs.

For Label

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

Form for Consent of Proposed Investigator(s) from other than PI's Department

- 1. Project No.
.....
- 2. Name and department of Principal Investigator:
.....
- 3. Title of Project
.....
.....
.....
- 4. Name and department of Proposed Investigator(s)
.....
.....
.....
- 5. Number of man-days of involvement (for each investigator)
.....

Agreed

Recommended

Signature of Proposed Investigator(s)
(with date)

Signature of Principal Investigator
(with date)

Dean (IRD), IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator
2. Investigator(s)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR INVOLVEMENT OF CONSULTANT

1. Project No.:
.....
2. Name and department of Principal Investigator:
.....
3. Title of Project :
.....
4. Name and address of the proposed Consultant(s)
.....
.....
.....
5. Nature of involvement of Consultant(s):.....
6. Proposed duration of engagement of the Consultant – man months or man days.....
7. (a) Total Contracted amount excluding service tax = (T) = Rs.....
(b) Proposed payment to Consultant(s) = (B) = Rs.
.....
(c) Approved amount to Consultants earlier , if any (C) = Rs.....
(d) Payment in terms of percentage of total contracted amount = $[(B+C)/T]*100 =$
..... %

Encl.: 1. Brief bio-data of the Consultant 2. Consent of the Consultant

Signature of Principal Investigator(with date)

Dean (IRD), IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR STUDENT ASSISTANTSHIP* – FOR UG/PG/PH.D/POST DOC FELLOW

1. Project No.:

.....

2. Name of Principal Investigator:

.....

3. Name and details of UG/PG/Ph.D. student(s)/ Post Doc Fellow(s):

.....

Sl. No.	Name	UG/PG/Ph.D. student(s)/ Post Doc Fellow(s)	Amount (Rs.)	Duration
1.				
2.				
3.				
4.				

4. Signature of supervisor, if other than P.I., (for Ph.D. and Post Doc. Fellow(s)):

.....

Approved

**Signature of P.I.
(with date)**

- *1. The PI may engage University students (who may or may not be getting fellowship/ assistantship) as student assistants for the project work. The payment for such engagement shall be limited to Rs 8,000/- per month for UG and PG students, Rs 18,000/- per month for Ph. D. students and Rs 40,000/-per month for Post Doc Fellows.
2. For sponsored research project(s), this is admissible only if there is a provision in the sanctioned budget.

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR APPROVAL OF PROJECT POSITION(S)*

- 1. Project No. :
- 2. Name and Department of Principal Investigator:
- 3. Title of the Project :
- 4. Sponsor:
- 5. Date of Start:..... Date End:.....
- 6. Position(s) details for advertisement:.....

Project position(s)	Monthly Emoluments	Duration

- 7. Draft advertisement: Enclosed

Signature of Principal Investigator (with date)

*The project staff shall be appointed as per clause 4.1 and the Annexure-2 and 3 of rules for sponsored research and industrial consultancy projects.

Dean (IRD), IGDTUW

Principal Investigator

Project position(s) and draft advertisement approved

Or

Project position(s) and draft advertisement with the proposed modifications approved

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

Dean (IRD)/06

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN
(Name of Dept./Centre)

Dated:

ADVERTISEMENT TO FILL UP PROJECT POSITIONS*

Applications are invited from Indian nationals only for project position(s) as per the details given below for the consultancy/research project(s) under the Principal investigator (Name:), Dept./Centre

..... **INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN.**

1. Title of project
 2. Sponsor of the project
 3. Project position(s) and number
 4. Qualifications
 5. Emoluments
 6. Duration
 7. Job description
1. Candidates before appearing for the interview shall ensure that they are eligible for the position they intend to apply.
 2. Candidates desiring to appear for the Interview should submit their applications with the following documents to the office of Principal Investigator through email, by post or produce at the time of Interview:
 - Application in a plain paper with detailed CV including chronological discipline of degree/certificates obtained.
 - Experience including research, industrial field and others.
 - Self-Attested copies of degree/certificate and experience certificate.
 3. Candidate shall bring along with them the original degree(s)/certificate(s) and experience certificate(s) at the time of interview for verification.
 4. Preference will be given to SC/ST candidates on equal qualifications and experience.
 5. Please note that no TA/DA is admissible for attending the interview.

The last date for application to be submitted to office of Principal Investigator isby 5 PM.
(not applicable for walk in interview)

The interview will be held at on at (to be given only for walk in interview)

Tel:

Fax:

**Name and signature
of Principal Investigator**

Email:*To be uploaded on IGDTUW website and copy may be sent to appropriate addresses by PI for wider circulation.

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

SCREENING COMMITTEE REPORT
(Not applicable in case of walk- in interview)

- I. Copy of approval from Dean (IRD) for project position(s) and advertisement to be attached by P.I.
- II. Member of screening committee
1.Chairperson (from the approved panel)
 2.P.I. (Member)
 3.Faculty member from the Department(Member)
- III. Number of application(s) received :
.....
- IV. Name of Candidate(s) recommended for interview: (To be enclosed along with the synopsis of the candidates)
- V. List of rejected applicants along with the reason(s) : (To be enclosed along with the synopsis of the candidates)

Member (P.I.)

Member

Chairperson

Dated:

Dean (IRD), IGDTUW

The recommendation of the Screening Committee are in accordance with the norms laid down in the project and advertisement.

Report of Screening Committee approved/not approved
.....

**Dean
(IRD)**

**INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN
SELECTION COMMITTEE REPORT**

I. Copy of approval from Dean (IRD) for project position(s) and advertisement : to be attached by P.I.

II. Member(s) of Selection Committee:

- 1.Chairperson (from the approved panel)
- 2.Head of the Department or his/her nominee (Member)
- 3.P.I. (Member)
- 4.Faculty member from Outside the Department
- 5.External Expert (if applicable)

III. Name of candidate(s) appeared before the Selection Committee: List Enclosed

RECOMMENDATIONS

The following candidate(s) have been found suitable for appointment to the project position(s) in the order of merit.

Sl. No.	Name	Project Position	Emoluments

Member (P.I.) Member Member Member Chairperson

Dean (IRD), IGDTUW

The recommendation of the Selection Committee are in accordance with the norms laid down in the project and advertisement.

Report of Selection Committee approved/not approved (give reasons)

Dean (IRD)

CONTRACT*

Between Dr....., Principal investigator,(name of the dept./centre) Indira Gandhi Delhi Technical University for Women, being the first party who hereby agree to assign the work given in the schedule below to Shri/km..... s/d/o Shri, the second party, on the basis of particulars given in his/her application on the following terms and conditions:-

1. That the first party will pay the second party a monthly consolidated amount as per the schedule given below on the satisfactory completion of the work assigned.
2. That the second party do hereby agree to complete the work assigned as per the schedule given below, to the satisfaction of the first party, and to hand over all assets/ materials of the first party in his/her charge at completion or termination of the contract as the case may be:-
3. (i) Name of the Scheme: Project no. sponsored by
(ii) Type of work to be done:
(iii) Duration in which the work is to be completed as per this contract:
From to
(iv) Amount to be paid monthly: Rs. per month + HRA as per institute Rules.
(v) The facilities to carry on the above work will be made available by the first party on all working days of the IGDTUW between 8:45 a.m. to 5.30 p.m. and any other days required for completing the work by the first party and no claim for any extra time will be entertained.
4. The first party reserves the right to rescind the contract with a fortnight notice in the event it is found that the progress and the performance of the second party are not satisfactory.
5. This contract can also be rescinded by either party without assigning any reason, with a notice of the fortnight.
6. That the first party and the second party do hereby declare to abide by the aforesaid terms of this contract and the second party will have no claim other than the amount specified in the schedule of work as per this contract to be done by him/her.
7. That his/her contract and its acceptance by the second party will only be for the specified work and duration and this would bear no claim, whatsoever, to other future work, if any, to the second party on this accounts.

Signed this day:-

Second Party
With complete address

First Party
Principal Investigator
Name and Department

1. Witness

1. Witness

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR EXTENSION OF TIME / REVISION OF PROJECT AMOUNT

- 1. Project No.:
- 2. Name and department of Principal Investigator:
- 3. Title of the Project:
- 4. Sponsor:
- 5. Extension of Time : Expected date of completion
 - (a) Original
 - (b) Revised
- 6. Revision of Project budget : Contracted Amount
 - (a) Original (Rs.).....
 - (b) Revised (Rs.).....

Budget Head / Description	Revised Budgeted Amount (In Rs.)
1. Gross Amount including Service Tax	
2. Less- Service Tax	
3. Contracted Amount	
4. University Share (35% of Contracted Amount)	
5. Expenditure (Estimated*)	
6. Honorarium (Estimated)	

- 7. Reason for Extension of Time and /or Revision of amount (correspondence to be attached, if any).
.....
.....

Signature of Principal Investigator (with date)

Dean (IRD), IGDTUW

Approved /Not Approved

Copy to: 1.Principal Investigator

Dean (IRD)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR DOMESTIC TRAVEL*

- 1. Project No.:
2. Name of Principal Investigator:
3. Sponsor:
4. Project title:
5. Name and designation of travelling person(s)
(a) (b)
(c) (d)
6. (a) Place(s) to be visited along with dates :
(b) Purpose of visit :
(c) Mode of travel:

APPROVED travel under clause 5.1 of rules for sponsored research and industrial consultancy project.

Signature of P.I. (with date)

- *1. If sponsor has specified any specific condition(s) for travel under the project that shall be followed.
2. To be attached by each travelling person with the respective TA bill form(s)
3. To be sent to Dean (IRD) office only, in case advance is required.

7. Advance in the name of: Empl. No.
of Rs.

Signature of applicant for advance

Recommended

Signature of P.I. (with date)

Dean (IRD), IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

- Certified that the visit has been undertaken with leave duly approved by the competent authority.

Signature and name of travelling person (with date)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR INTERNATIONAL TRAVEL*

- 1 Project No.:
- 2 Name and department of Principal Investigator:
- 3 Sponsor:
- 4 Project title:
- 5 Name and designation of travelling person(s)
- 6 (a) Itinerary of the travel along with date and duration:
-
-
- (b) Purpose of visit :.....
- 7 Estimated Expenditure
- (a) Travel Expenditure:
- i. Road/Rail Fare: Rs. Air fare Rs.
- ii. Local journey Rs.
- (b) Per Diem:
- (i) Daily allowance @ for days =Rs.
- (ii) Hotel accommodation @ for.....days = Rs.
- (c) Visa and assistance fees(Rs): Travel insurance Rs :
- (d) Miscellaneous expenses (registration, telephone/internet etc) Rs.
- 8 Advance in the name of: Empl. No.
- of Rs.

Signature of applicant for advance

Recommended

Signature of P.I. (with date)

- *1. If sponsor has specified any specific condition(s) for travel under the project that shall be followed.
- 2. To be attached by each travelling person with the respective TA bill form(s)

Dean (IRD), IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

- Certified that the visit has been undertaken with ex India leave duly approved by the competent authority.

Signature and name of travelling person (with date)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR EXPENDITURE FROM PDF*

1. Name of Faculty:..... Emp. no:

2. Purpose: Travel* (Domestic and International)/Purchase /Manpower engagement

3. Travel (A) Itinerary of the travel along with date and duration:

.....
.....

(B) Purpose of visit :

(C) Estimated Expenditure

(a) Travel Expenditure:

i. Road/Rail Fare: Rs. Air fare Rs.

ii. Local journey Rs.

(b) Per Diem:

i. Daily allowance @ for days = Rs.

ii. Hotel accommodation @ for days = Rs.

(c) Visa and assistance fees(Rs): Travel insurance Rs :

(d) Miscellaneous expenses (registration, telephone/internet etc) Rs.

Total: Rs.

Advance, if required, Rs.

4. Details of Purchase (item(s) and estimated cost)

(Only for the purchase to be processed by calling quotations as per University purchase rules):

.....
.....

5. Manpower engagement: Position Emoluments Duration.....

(As per rules for sponsored research and industrial consultancy project. Bio-data of the person(s) to be enclosed)

Signature of the faculty with date

*Subject to admissible under clause 7.2.1 of rules for sponsored research and industrial consultancy project

Dean (IRD) Office, IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Concerned Faculty

- Certified that the visit has been undertaken with leave duly approved by the competent authority.

Signature and name of travelling person (with date)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

FORM FOR DISTRIBUTION OF CONSULTANCY PROJECT FUNDS

- 1. Project No..... Distribution : Final / Interim
- 2. Name and department of Principal Investigator:
- 3. Title of Project :
- 4. Project Fund Position
 - Gross Amount including Service Tax=G = Rs.
 - Less-Service Tax=L = Rs.
 - Contracted amount T = (G-L) = Rs.
 - Amount payable to Univesrity share P = Rs.
 - Amount distributed earlier (if any) = X = Rs.
 - Remaining amount (F)=T- P - X = Rs.
 - Total expenditure on the project = E = Rs.
 - Savings = S = (F-E) = Rs.
- 5.Amount to be Distributed = Rs.

Mention all the names as per approval even if the amount to be disbursed is nil.

To be filled by P.I.				To be filled by (R&C)		
Name	Employee Code	Bank A/c No.	Amount in Rs.	Income Tax	Net. Amount	Token No.
TOTAL						

Certified that

(a) (a1) This is final distribution and that the work has been completed and the report has been sent.

OR

(a2) This is interim distribution and the percentage of amount of work done against the project is not less than the corresponding percentage of the charges being distributed now.

(b) No separate T&P register was maintained for the project

OR

Separate T&P register was maintained, the certificate duly signed by Head of The deptt/centre is attached.

Signature of Principal Investigator (with date)

Dean (IRD), IGDTUW

Approved /Not Approved

Dean (IRD)

Copy to: 1. Principal Investigator

For distribution of Total University Share into RDF(R&C Fund), DDF,PDF and incentive to Staff , SWF etc. on getting full payment only at the time of closing the Project (on final distribution only).

Total University Share deducted Rs.....

Details of Distribution of Total University Share deducted

(a) RDF (RC Fund) % of Rs.....

(b) PDF % of Rs.....

(c1) PDF of Dr..... = Rs.....

(c2) PDF of Dr..... = Rs.....

(c3) PDF of Dr..... = Rs.....

TOTAL = Rs.

(e) Distribution of incentive to office Staff etc.% of Rs.....

TOTAL = Rs.

Details of distribution of amount as at (e) Rs.....

1. Department Office (20%) Rs.....

2. Dean (IRD) office and persons directly related to R&C work (30%) Rs.....

3. Fund for Community Activities (15%) Rs.....

4. Central Administrative Fund (35%) Rs.....

TOTAL = Rs.

Details of distribution of Department Office Staff Share as at (2) :

Name	Designation	Employee Code	Saving Bank A/c No.	Amount in Rs.
TOTAL				

Percentage of Various Components of Total University Share deducted

Components	Routine testing	consultancy
(1) RDF	95 %	75%
(2) PDF	nil	20 %
(3) Incentive to Office Staff etc.	5 %	5 %

(Signature of Principal Investigator)

Certificate of T&P items purchased under project

(To be submitted to Dean (IRD) office at the time of closure of the project, if a separate T&P register for the project has been maintained by PI)

1. Project No. :.....
2. Name and department of the Principal Investigator:
3. Title of the Project:
4. Sponsor:
5. T&P register has been submitted to department store/office (as per purchase and store rules)

Principal Investigator (with date)

Head of the Department (with date)

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN
(PROPOSAL FOR DISTRIBUTION OF UOC RECEIVED AGAINST SPONSORED RESEARCH PROJECTS)

1. Project No: 2. Distribution : Interim Final

3. Title of Project
.....

4. Sponsoring Agency:
.....

5. Name of P.I. : 6. Designation
:.....

7. Deptt./ Centre :
.....

8. Date of Commencement of Project: 9. Date of Completion of
Project:.....

10. Amount of UOC Deducted till date

- (a) Amount Date of Deduction
.....
- (b) Amount Date of Deduction
.....
- (c) Amount Date of Deduction
.....

Total (T) _____

11. Amount of UOC available for this

Distribution (D) : Rs.....
(not more than 50% of T in case of interim
distribution) :

12. 20% of (D) to PDF : Rs.....

- (a) PDF of Rs.....
Dr.....
- (b) PDF of Rs.....
Dr.....
- (c) PDF of Rs.....
Dr.....
- Total Rs.....

13. 10% of (D) : Rs.....

**Details of distribution of amount as
at Sl. 13.**

- (a) Department Office (20%) Rs.....
- (b) Dean RC office and persons (25%) Rs.....
Directly related to R&C
work
- (c) Tech. Staff of Dept. (40%) Rs.....
Central Administrative Rs.....
- (d) Fund (5%)

Total Rs.

**14. Balance to R&C Fund for IDF
(50% of D)**

Rs.....

.....

Rs.....

.....

Total of 12,13,14 = D

[Details of distribution of Incentive to Deptt. office staff and Tech. Staff are given on the reverse]

15 (a) Certified that no Ministerial or Technical Staff is being paid out of the incentive money from Sponsored Research Projects in a financial year an amount exceeding his/her gross salary of one month.

(b) Certified that the total remuneration including that proposed here and over time payment received by the individuals are within the limits laid down by University rules.

**Signature of Head of the Deptt/Centre (with
date & stamp)**

**Signature of the Principal
Investigator (with date)**

**Endorsement by Dean (IRD)
Office, IGDTUW**

The above request is in accordance with the norms laid down.

**Approved/Not
Approved**

**Dealing
Asstt.**

Dean (IRD)

Copy to: 1. Head of the Department
2. Principal Investigator

**Request for hiring of services in the project Through approved agency
OR
forHiring of a Placement Agency**

The hiring of the following services (list of services given overleaf) may kindly be approved in the interest of the work and to ensure timely completion of targets for project. In case no approved agency exists, permission of hiring a placement agency may please be permitted:

1. Name of the project : _____
2. Type of work : _____
3. Quantum of Work : _____
(The requisite work should be quantum*and Work Specific with & duration based so that the Agency be instructed to complete the Concerned work through their work source).
4. Unskilled I or II /Semi Skilled I or II/ Skilled /Highly Skilled I or II : _____
5. Mode of payment Monthly/single bill basis : _____
6. Expected duration to complete this work : _____
Per day basis
7. Chargeable Project Grant No... : _____
8. The budget head : _____
9. Justification with the reason(s) as to why that work cannot be performed by the existing Project Staff -

Recommended/Not Recommended

SIGNATURE OF
COCERNING P.I

Head of the Deptt./Office

NOTE: - * Please see Appendix-A as overleaf to fill these columns.

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REPORT OF DEAN (IRD) OFFICE

Following is the fund position in the above project grant.

Fund budgeted in the budget head Rs....

Available fund in the budget head Rs....

Recommended that the work order as above may be given to the hiring agency the Guard well security services

(p) Ltd for finalization of the work for the period from.....to.....

D.A. (Accounts) Dean (IRD) May Please signed letter to M/S.

.....

Signed
Dean (IRD)

LIST OF SERVICES

Sl. No.	Category	Work
1.	UNSKILLED	<ul style="list-style-type: none"> (i) Checking of Forms/Identity Cards at the beginning of the Semester. (ii) Filing papers in files & numbering them. (iii) Replacing of file covers. (iv) Sanitation work. (v) Repair work of buildings. (vi) Electrical maintenance work. (vii) Water supply work. (viii) Horticulture work. (ix) Dusting & cleaning of Computer Key Boards of Computers in labs & Offices.
2.	SEMISKILLED	<ul style="list-style-type: none"> (i) Periodic Maintenance and upkeep of instruments/equipment & other technical work in laboratories of a semiskilled nature. (ii) Periodic Maintenance of a semiskilled nature, in Buildings (iii) Periodic Maintenance of a semiskilled nature, of Electrical installations (iv) Periodic Maintenance of a semiskilled nature, of Water Supply installations
3.	SKILLED	<ul style="list-style-type: none"> (i) Tabulation work. (ii) Field study and sampling. (iii) Sample analysis. (iv) Maintenance of office records. (v) Maintenance of Institute vehicles. (vi) Periodic Maintenance and upkeep of instruments/equipment & other technical work in laboratories of a skilled nature. (vii) Periodic Maintenance of a skilled nature, in Buildings. (viii) Periodic Maintenance of a skilled nature, of Electrical installations (ix) Periodic Maintenance of a skilled nature, of Water Supply installations (x) Maintenance of a skilled nature, of Air-conditioning equipment. (xi) Maintenance of a skilled nature, of Air-conditioning installations. (xii) Typing work on Computers. (xiii) Any other work of a skilled nature.
4.	HIGHLY SKILLED	<ul style="list-style-type: none"> (i) Collection of data. (ii) Field Study and sampling. (iii) Sample analysis. (iv) Computer Data entry on per page basis. (v) Driving of Vehicles for students tours, transporting persons to the airport, shifting the patients to out station hospitals etc. (vi) Recording of Minutes of meetings using shorthand. (vii) Periodic Maintenance and upkeep of instruments/equipment & other technical work in laboratories of a highly skilled nature. (viii) Periodic Maintenance of highly skilled nature, in Buildings. (ix) Periodic Maintenance of highly skilled nature, of Electrical installations. (x) Periodic Maintenance of highly skilled nature, of Water Supply installations (xi) Maintenance of highly skilled nature, of Air-conditioning equipment. (xii) Maintenance of highly skilled nature, of Air-conditioning installations (xiii) Any other work of a highly skilled nature.

(To be issued 30 days before the completion of Time Bound Engagement/Completion of the
Project (delete as not applicable)
Department of _____

INDIRA GANDHI DELHI TECHNICAL UNIVERSITY FOR WOMEN

Termination of Time Bound Engagement Under Category _____

in Consultancy/Sponsored Research Project No _____

Title : _____

No. IGDTUW/-PI/Cons/Spons.Res Project

Dated : _____

To

Whereas vide this office letter No. IGDTUW/-PI/Cons/ Spons Res Project _____
dated _____ you were offered the time bound engagement w.e.f. _____ to
_____ under Consultancy / Sponsored Research Project No. _____
Title: _____.

You had accepted the same and had joined the job. The above project is to be completed on
_____.

Whereas, it was mentioned at **serial No. III** of your letter of engagement referred above, the
said assignment shall stand automatically terminated on _____.

You are hereby served with 30 days notice for termination of your above assignment as per
section 25(F) (a) of the Industrial Disputes Act, 1947 for the under mentioned reasons:

Please acknowledge receipt of this letter – by signing on its duplicate copy.

(_____) Name & Signature of PI (with date)
Project No. _____
Department _____

Copy to:

- 1 Dean (R&C)
- 2 Head of the Department/Centre