** JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHIRAPPALLI - 620020.**

**REQUISITION FOR CONSULTANCY SERVICES**

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation/ Individual |  | GST No. |  |
| Full Registered Address |  |
| Website |  |
| About the Organisation(Strike off irrelevant) | Proprietary / Partnership LLP / Limited Company | NGO/ Any other |  |
| Contact Details | Mobile |  | E-mail |  |
| Department / Centre conducting consultancy |  | Area of Consultancy |  |
| Specific requirements | 1. |
| 2. |
| 3. |
| 4. |
| * This requisition will be subject to the Consultancy Policy of Jamal Mohamed College.
* The information given above are factual and correct according to the records maintained by the Organisation and is submitted with genuine intention to establish a professional relationship.
 |
| Name of Applicant | Designation | Signature with date |
|  |  |  |

***Checked and verified by:***

Signature of the faculty member Signature of the HOD /

 with date Coordinator with date

***Forwarded by: Approved by:***

Signature of the Dean Research Signature of the Principal

 with date with date

**Enclosure: Proforma - A/ B**

**Proforma - A**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHIRAPPALLI - 620020.**

**BUDGET PREPARATION FOR ADVISORY CONSULTANCY**

|  |  |  |
| --- | --- | --- |
|  | Travel |  |
|  | Contingency |  |
|  | Subtotal = T |  |
|  | Consultancy fee |  |
|  | Service charge GST (18%) = S  |  |
|  | Total project cost (P) = T+X+S |  |

***Checked and verified by:***

Signature of the faculty member Signature of the HOD /

 with date Coordinator with date

**Proforma - B**

** JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHIRAPPALLI - 620020.**

**BUDGET PREPARATION FOR GENERAL CONSULTANCY**

**A. Non-Recurring (Capital Cost) Equipments**

**B. Recurring** (Direct expenses)

|  |  |  |
| --- | --- | --- |
|  | Cost of man day charges /man power /salary |  |
|  | Equipment usage charges |  |
|  | Charges for utilizing Central facilities |  |
|  | Chemicals/consumables |  |
|  | Travel |  |
|  | Contingency |  |
|  | Consultation fee = X (not less than 33.3%; rounded off to 35% of the total budget T) |  |
|  | Service charge GST (18%) |  |
| **Total** = T (A+B1+B2+B3+B4+B5+B6+B7+B8) |  |

***Checked and verified by:***

Signature of the faculty member Signature of the HOD /

 with date Coordinator with date