Form ID: DYPCET: Account/005 **Date: _____**

CONSENT FORM FOR ACTIVITY

Name of Activity Coordinator_____ Department _____

Activity details:

_____

_____

Sr. No	Probable Expenditure Details	Amount Required (Rs)	Amount Sanctioned (Rs)
Total			

Forwarded by (Dean/HoD): _____

Sanctioned by

Principal **Executive Director**

Note: Attach this duly signed consent form along with advance/expenditure submission form.

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