

From (C) No. 28.

SUBJECT.....

CENTRE CODE.....

BOARD OF SECONDARY EDUCATION, ODISHA, CUTTACK
D.El.Ed. EXAMINATION. _____

Name and Address of
 Practical Examiner (External/Internal).

Office Order..... Date.....

<u>Name of the Work</u>	<u>No of Candidate</u>	<u>Rate</u>	<u>Amount</u>
A. (i) 1 st year & 1 st year Back			
(ii) 2 nd year & 2 nd year Back			

B. Travelling allowance 2 X..... km X.....

Total

C. Postal Expenses
(Submit Original Receipt)D. Miscellaneous Expenses
(Submit Vouchers)

Total Amount

Signature of examiner/ Centre Supdt./ Observer/ Tabulation

Passed for Rs.....(Rupees.....

Pay for Rs.....

Rupees.....

D.A.

S.O.

I/A

SECRETARY.

Paid by Cheque No.....

Date.....

ACCOUNTANT

Received Payment Rs.....

Rupees.....

.....)

Full signature with Date
 Examiner/ Centre Supdt./ Tabulator/ Observer.

INSTRUCTIONS

1. All claims on the Board shall be submitted to the Board within 6 (six) months from of the execution of work.
2. All payment made are subject to return in case of Audit objection.
3. Remuneration for all Practical Examination work per candidate is Rs.6/- (six0 only.
(To be equally divided between the External and Internal Examiner.)