



Shaheed Benazir Bhutto University Sheringal
Upper Dir, Khyber Pakhtunkhwa, Pakistan

Annexure-A

The Treasurer,
Shaheed Benazir Bhutto University Sheringal

Through: **The Director Teaching & Admissions**
Subject: **Remuneration Claims of the Examination Conducting by a Visiting Teacher.**

Dear Sir,

I performed the duty of the _____ term examination conducting of Spring/Fall _____ semester in the month of _____ year _____. The remuneration claims of said examination duty and its details given below are forwarded to your good office for payment.

S.No.	Department	Program	Semester	Course Title + Credit hours	Student Strength	Total hours of paper conduction	Claim Rs.		
01									
02									
03									
04									
05									
(a). Gross Claims Rs.									
(b). Total Expenses Rs.				Electricity Bill Details			Room Rent	Others	Total Deduction
				Previous Bills	Current Bills	Total			
Net Claims Rs. [(a)-(b)]									

Documents attached are:

- i. Schedule of time duration and Flow Chart for processing & payment of claims (**Annexure-B**),
- ii. Visiting teacher examination duty table (Date Sheet, **Annexure-C**) attested by the Chairman/HOD of parent department,
- iii. Biometric attendance of visiting lecturer issued by the Biometric in charge,
- iv. Appointment letter/Extension letter issued by the office of the Registrar.

Yours Sincerely

Signature: _____

Name: _____

Designation: _____

Department: _____

Claim submission Date: _____

Residing in the hostel room no.: _____

Mobile No.: _____

Forwarded by
Chairman/HOD Parent Department

Signature:

Stamp:

Forwarding Date: _____



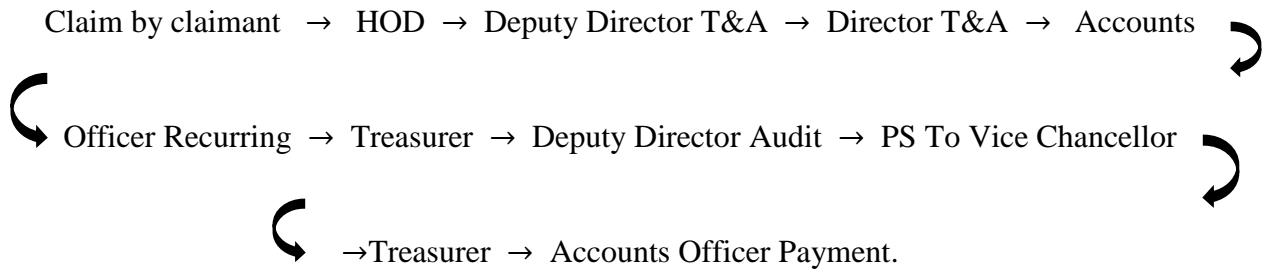
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Annexure-B

Scheduled time duration for finalizing the visiting claims Payments in the Offices

S. No.	Office	Max time duration to be taken	Actual time taken from date to date	Initial (Necessary)
01	Preparation of claims by claimant	02 working days	From _____ to _____	
02	HOD	02 working days	From _____ to _____	
03	Director Teaching & Admission	02 working days	From _____ to _____	
04	Treasurer	03 working days	From _____ to _____	
05	Audit Office	02 working days	From _____ to _____	
06	Vice Chancellor Office	02 working days	From _____ to _____	
07	Any other office in case of query	02 working days	From _____ to _____	

Flow Chart of the process for finalizing the visiting claims payments in the Offices



(Keeping in view, the above time schedule the claims submitted in first week of a month shall be paid in the last week of that month. The claimants are therefore requested to avoid visits to these offices for the preferred claims payment during the scheduled time duration.)



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Annexure- C

Visiting Teacher Examination Duty Table (Date Sheet)

Spring/Fall Semester Examination _____ Term _____

Name of Visiting Teacher _____ Designation _____

S#	Department	Program	Semester	Course Title + Credit hours	Date	Day	Time duration of paper From....To.....	Signature & Stamp of Relevant Chairman/HOD for certifying that relevant students' attendance record/course work etc. have been checked and found correct as per rules.
01								
02								
03								
04								
05								

Signature & Stamp of

Chairman/HOD: _____

Parent Department: _____