ਜਗਤ ਗੁਰੂ ਨਾਨਕ ਦੇਵ
ਪੰਜਾਬ ਸਟੇਟ ਓਪਨ ਯੂਨੀਵਰਸਿਟੀ, ਪਟਿਆਲਾ
(Established by Act No.19 of 2019 of Legislature of the State of Punjab)

Ref.No/ PSOU/ COE/.1618 Dated: 28.11.2025

ਵੱਲ

ਸਮੂਹ ਪ੍ਰਿੰਸੀਪਲ ਸਾਹਿਬਾਨ (ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ)
ਪੰਜਾਬ।

ਵਿਸ਼ਾ:- ਪ੍ਰੀਖਿਆਵਾਂ (ਦਸੰਬਰ 2025/ਜਨਵਰੀ 2026) ਸਬੰਧੀ Award list files ਅਤੇ Bill Files ਜਮ੍ਹਾਂ ਕਰਵਾਉਣ ਸਬੰਧੀ।

ਉਪਰੋਕਤ ਵਿਸ਼ੇ ਦੇ ਸਬੰਧ ਵਿੱਚ ਦਰਸਾਇਆ ਜਾਂਦਾ ਹੈ ਕਿ ਯੂਨੀਵਰਸਿਟੀ ਪ੍ਰੀਖਿਆਵਾਂ ਸਬੰਧੀ **Annexure-L (ਨਾਲ ਨੱਥੀ)** ਦੇ ਵਿੱਚ mention ਕੀਤੇ ਹੋਏ ਹੇਠ ਲਿਖੇ ਦਸਤਾਵੇਜ਼ਾਂ ਦੀ ਵਰਤੋਂ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰਾਂ ਵਲੋਂ ਕਰਨੀ ਯਕੀਨੀ ਬਣਾਈ ਜਾਵੇ:

1) ਸਬੰਧਤ ਫਾਈਲਾਂ **(Total -6);** File C1 to File C6 ਪ੍ਰੀਖਿਆਵਾਂ ਕੰਡਕਟ ਕਰਨ ਤੋਂ ਬਾਅਦ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰਾਂ ਵੱਲੋ ਯੂਨੀਵਰਸਿਟੀ ਦੀ ਪ੍ਰੀਖਿਆ ਸ਼ਾਖਾ ਨੂੰ ਜਮ੍ਹਾਂ ਕਰਵਾਈਆਂ ਜਾਣ ।
2) **Annexure-L ਮੁਤਾਬਕ** - File C1 and File C2 ਵਿੱਚ ਬਿੱਲਾਂ ਨਾਲ ਸਬੰਧਤ ਸਾਰੇ ਪ੍ਰੋਫਾਰਮੇ ਲਗਾਏ ਜਾਣ ਅਤੇ ਫਾਈਲ C3 ਵਿੱਚ Award List (External – Practical) ਦਾ ਰਿਕਾਰਡ ਨੱਥੀ ਕੀਤਾ ਜਾਵੇ। File-C5 ਵਿੱਚ Internal (Theory) Award list ਅਤੇ File C6 ਵਿੱਚ Internal (Practical) Award list ਦਾ ਰਿਕਾਰਡ ਨੱਥੀ ਕੀਤਾ ਜਾਵੇ।
3) ਫਾਈਲ C4 ਵਿੱਚ ਥਿਓਰੀ ਅਤੇ ਪ੍ਰੈਕਟੀਕਲ ਪ੍ਰੀਖਿਆਵਾਂ ਦੇ ਸਬੰਧਤ ਪ੍ਰੋਫਾਰਮੇ ਨੱਥੀ ਕੀਤੇ ਜਾਣ।
4) ਹਰੇਕ Award List ਤੇ ਕਾਲਜ ਦੇ Faculty ਅਤੇ Coordinator ਵੱਲੋਂ Sign ਕਰਨੇ ਯਕੀਨੀ ਬਣਾਇਆ ਜਾਵੇ।
5) ਫਾਈਲ C1 to C6 ਦਾ Index ਹੋਣਾ ਜ਼ਰੂਰੀ ਹੈ। Index ਤੇ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ ਦੇ ਕੋਆਰਡੀਨੇਟਰ ਅਤੇ ਪ੍ਰਿੰਸੀਪਲ ਦੇ ਦਸਤਖਤ (with stamp) ਹੋਣੇ ਲਾਜ਼ਮੀ ਹਨ।

ਉਪਰੋਕਤ ਅਨੁਸਾਰ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ ਵਲੋਂ ਸਾਰੇ ਲੋੜੀਂਦੇ ਦਸਤਾਵੇਜ਼ ਯੂਨੀਵਰਸਿਟੀ ਪ੍ਰੀਖਿਆ ਸ਼ਾਖਾ ਨੂੰ ਨਾ ਭੇਜਣ ਜਾਂ ਅਧੂਰੇ ਹੋਣ ਦੀ ਸੂਰਤ ਵਿੱਚ ਸਬੰਧਤ ਕਾਲਜ ਦਾ Result timely declare ਕੀਤਾ ਜਾਣਾ ਸੰਭਵ ਨਹੀਂ ਹੋਵੇਗਾ ਅਤੇ ਸਬੰਧਤ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ ਦੇ ਮਾਣਭੱਤੇ ਦੀ ਅਦਾਇਗੀ ਕੀਤੀ ਜਾਣੀ ਸੰਭਵ ਨਹੀਂ ਹੋਵੇਗੀ।

ਉਪਰੋਕਤ ਦਸਤਾਵੇਜ਼ਾਂ ਨੂੰ ਪ੍ਰੀਖਿਆਵਾਂ ਸਬੰਧੀ ਮਟੀਰਿਅਲ ਕੁਲੈਕਟ ਕਰਨ ਸਮੇਂ ਯੂਨੀਵਰਸਿਟੀ ਸਟਾਫ ਵਲੋਂ ਰਸੀਵ ਕੀਤਾ ਜਾਵੇਗਾ। ਇਸ ਲਈ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰਾਂ ਵਲੋਂ ਸਬੰਧਤ ਦਸਤਾਵੇਜ਼ ਤਿਆਰ ਰੱਖੇ ਜਾਣ।

ਉਪਰੋਕਤ ਸਬੰਧੀ ਹੋਰ ਜਾਣਕਾਰੀ ਲਈ ਪ੍ਰੀਖਿਆ ਸ਼ਾਖਾ ਦੀ ਈ-ਮੇਲ **(coepsou@psou.ac.in) ਅਤੇ Helpline No. (95307-41524)** ਤੇ ਸੰਪਰਕ ਕੀਤਾ ਜਾ ਸਕਦਾ ਹੈ। ਇਸ ਤੋਂ ਇਲਾਵਾਂ ਪ੍ਰੀਖਿਆਵਾਂ ਦੇ ਬਿੱਲਾਂ ਸਬੰਧੀ ਕਿਸੇ ਵੀ ਤਰ੍ਹਾਂ ਦੀ ਜਾਣਕਾਰੀ ਲਈ **exam-bills@psou.ac.in** ਤੇ ਈ-ਮੇਲ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

ਨੱਥੀ:

1) **Annexure -L**
2) **Index (2.1,2.2,2.3)**

28/11/25
ਕੰਟਰੋਲਰ ਪ੍ਰੀਖਿਆਵਾਂ

ਉਤਾਰਾ:-

1. ਕੰਟਰੋਲਰ ਪ੍ਰੀਖਿਆਵਾਂ
2. ਸ੍ਰੀ ਵਿਸ਼ਾਲ ਕੁਮਾਰ (DEO) – ਸਬੰਧਤ ਨੂੰ ਈ.ਮੇਲ ਅਤੇ website ਤੇ ਅਪਲੋਡ ਕਰਨ ਸਬੰਧੀ।

Annexure-L { For Exam Centres - Colleges Only }

*** Hard copy of below documents is to be submitted in separate Files (with Index as first page) as mentioned below.**
a) Seal/stamp & Signature of Chief Coordinator/Principal of the college is required on Index page of all 06 Files.
b) All record is to be duly signed by Supdtt./Coordinator & then forwarded to Examination Branch of JGND PSOU.

**** Bills of respective Exam Centre will be processed by University only on receiving of hard copy of all below documents***

I) TABLE-A :: FILES for submission (Theory, Practical):
Exam Centres to *submit hard copy of below files to Examinations branch of JGNDPSOU:*

S.No	File No.	File Name	Documents to attach in Files
1.	File C1	**Exam Conduct - Bills** Theory Exams ***(attach Performas as mentioned below in Table C)***	P-4, P-4(A), P-16
2	File C2	**Exam Centres - Bills** Practical Exams ***(attach Performas as mentioned below in Table C)***	P-15, P-16
3	File C3	External Practical – **Award Lists**	Hard copy of Marks lists **(Each list should be duly signed by faculty incharge & LSCs Coordinator)**
4	File C4	**Exam Performas** C4.1 Theory Exam - Performas C4.2 Practical Exam - Performas ***(attach Performas as mentioned below in Table B)***	P-17, P-1, P-5, P-6 P-1
5	File C5	**Internal Theory -Award List**	Hard copy of Marks Lists **(Each list should be duly signed by faculty incharge & LSCs Coordinator)**
4.	File C6	**Internal Practical – Award List**	Hard copy of Marks Lists **(Each list should be duly signed by faculty incharge & LSCs Coordinator)**

II) TABLE-B :: Exam conduct Performas (Theory, Practical): Regarding Exam Centres

S.No	Performa No.	Details	Remarks
1.	P-17	**Receiving Performa for Exam Centres** *Performa – For Answer Books* *{OMR sheets, Theory ABs (32 pages), Practical ABs (10 pages)}*	INDEX - For submitting final all record to University **(Theory)**
2.	P-1	**Student Attendance Sheet Performa** *(As generated Online in Exam Portal for Theory, Practical)*	Student Attendance **(Theory, Practical)**
3.	P-5	**Daily consumption of Blank Answer Books Performa** *{OMR sheets, Theory ABs (32 pages), Practical ABs (10 pages)}*	ABs consumption record **(Theory)**
4.	P-6	**Performa to be used at Closing of Exam Centre** *(for details regarding used and unused exam material)*	All exam material record details

III) TABLE-C :: Bill Performas to be submitted reg. Exam Centre

S.No	Performa No.	Details
1.	P-4	**Attendance sheet cum Bill Performa for Staff on duty at Exam Centre** - *(for conduct of Theory Exams)*
2	P-4 (A)	**Bill Performa for Exam Centre (<50 Student Strength)**
2.	P-15	**Bill form for Practical Examiner** - *(for Practical Exams)*
3.	P-16	**Travelling Allowance Form** (TA Form) - *as applicable*

INDEX 2.1 -- LSCs (Exam centres) - AWARD LISTS FILES

(JGND PSOU - University Exams: July/August 2024)

File No: File C3 / File C5 /File C6 *(please name file no. separately as required)*

File Name: AWARD LISTS *(Internal Theory/ Internal Practical/ External Practical)*

a) Name of LSC (Exam centre):.....

b) Address:.....

c) District: .....

d) Name of LSC Coordinator: .....

e) Coordinator Mobile no: .....

INDEX

(please modify below Index as required)

S. No.	Annexure No.	Page Nos. (from-to)	Program Name	Sem.	Course Name	Course code	Name of Faculty Incharge (course)	Sign
1.								
2.								

LSC Coordinator (sign): ..... **College Principal (sign):.....**

Date: ..... **Institute Stamp: .....**

Date: .....

Note:

1) Separate hard copy files (File C3, File C5, File C6) must be submitted for Award list Files.
2) Mark Annexure as I, II, III and so on... & also ensure proper page nos.
3) Attach all hard copy record (Award Lists) as per above Index (Program wise & course wise)
4) Faculty Incharge (course) are to submit all hard copy record to respective LSC coordinator.
5) LSC coordinator are to ensure that separate files (Files C3/C5/C6 - as mentioned in Annexure-L) are submitted as required.
6) Each File (with Index) should be duly signed & forwarded by respective LSC coordinator to Chief coordinator/Principal for further forwarding to JGNDPSOU Examination Branch.
7) For timely declaration of results, it must be ensured by all concerned that hard copy of Award Lists be timely submitted (as per date of submission).

INDEX 2.2 -- LSCs (Exam centres) – BILL FILES

(JGND PSOU - University Exams: July/August 2024)

File No: File C1 / File C2 *(please name file no. separately as required)*

File Name: BILLS – Theory Exam / Practical Exam

*(Performas to be attached in Files: **as per Annexure-L**)*

a) Name of LSC (Exam centre):.....

b) Address:.....

c) District: .....

d) Name of LSC Coordinator: .....

e) Coordinator Mobile no: .....

INDEX

(please modify below Index as required)

S. No.	Annexure No.	Page Nos. (from-to)	Program Name	Sem.	Course Name	Course code	Name of Faculty Incharge (course)	Sign
1.								
2.								

LSC Coordinator (sign): .....

Date: .....

College Principal (sign):.....

Institute Stamp: .....

Date: .....

Note:

1) Separate hard copy files (for Theory/Practical) must be submitted for Bill Files.
2) Mark Annexure as I, II, III and so on... & also ensure proper page nos.
3) Attach all hard copy record (Bills) as per above Index (Program wise & course wise)
4) Faculty Incharge (course) are to submit all hard copy record to respective LSC coordinator.
5) LSC coordinator are to ensure that separate files (Files C1/Files C2), as mentioned in Annexure-L) are submitted.
6) Each File (with Index) should be duly signed & forwarded by respective LSC coordinator to Chief coordinator/Principal for further forwarding to JGNDPSOU Examination Branch.
7) For timely clearance of bills, it must be ensured by all concerned that hard copy of Bills be timely submitted (as per date of submission).

INDEX 2.3 -- LSCs (Exam centres) – EXAM PERFORMAS

(JGND PSOU - University Exams: July/August 2024)

File No: File C 4.1/ File C 4.2) *(please name file no. separately as required)*

File Name: PERFORMAS – Theory Exam / Practical Exam

*(Performas to be attached in Files: **as per Annexure-L**)*

a) Name of LSC (Exam centre):.....

b) Address:.....

c) District: .....

d) Name of LSC Coordinator: .....

e) Coordinator Mobile no: .....

INDEX

(please modify below Index as required)

S. No.	Annexure No.	Page Nos. (from-to)	Program Name	Sem.	Course Name	Course code	Name of Faculty Incharge (course)	Sign
1.								
2.								

LSC Coordinator (sign): ..... **College Principal (sign):.....**

Date: ..... **Institute Stamp: .....**

Date: .....

Note:

1) Separate hard copy files (for Theory/Practical) must be submitted.
2) Mark Annexure as I, II, III and so on... & also ensure proper page nos.
3) Attach all hard copy record (Performas) as per above Index (Program wise & course wise)
4) Faculty Incharge (course) are to submit all hard copy record to respective LSC coordinator.
5) LSC coordinator are to ensure that separate files (Files C4.1, C4.2), as mentioned in Annexure-II) are submitted.
6) Each File (with Index) should be duly signed & forwarded by respective LSC coordinator to Chief coordinator/Principal for further forwarding to JGNDPSOU Examination Branch.
7) It must be ensured by all concerned that hard copy be timely submitted (as per date of submission).

Undertaking

We do hereby declare that in concern to the Examination ..... held in Examination Centre at Inflibnet centre ,Gandhinagar, Gujarat, the manual attendance sheet of students are cross checked with present students, absentee list, detained list and UMC cases and the same has been uploaded online. If result got declared late due to wrong updation of serial number of answer sheets, then we shall be the sole responsible for the same. Duly signed printed copy of attendance sheet from login ID and Manual copy of attendance sheet are attached herewith.

Printing Cell Coordinator

Signature:

Name :

Mobile No. :

Superintendent

Signature:

Name :

Mobile No. :

Jagat Guru Nanak Dev Punjab State Open University, Patiala

Secrecy memo cum Attendance Sheet for Exam - (.....)

Center ID :
Examination Centre :
Program :
Paper Id :
Course.Code :
Course Name :
Exam. Date :
Bag.No :

Sr.No	Sem.	Student Name	Roll.No	AnswerSheet No	Signature
1					
2					
3					
4					

Total Present :_____Total Absent :_____Total UMC Case : _____

Centre Supdt. Please Note : *No Student should be allowed to appear in examination without valid admit card and Photo ID Card*

Signature & Mobile No. of Center Superintendent

_____

Signature & Mobile No.of Invigilator

_____

1. Exam Centre ID :.....
2. Exam Centre Name: .....

JAGAT GURU NANAK DEV PUNJAB STATE OPEN UNIVERSITY, PATIALA

(Examination: Month ...../Year .....)

Detail of Bill (Theory Exam)

Sr. No.	Particular	Date of Exam. (1)		Date of Exam (2)		Date of Exam (3)		Date of Exam (N)		No. of sessions	Rate	Amt
		M	E	M	E	M	E	M	E			
1	Strength of students (as per actual cut list)										____	____
2	Centre Superintendent											
3	Invigilator (one upto 50 students)											
4	Centre Clerk cum Computer Operator											
5	Other Staff:											
	(a) Daftri											
	(b) Waterman											
	(c) Sweeper											
	(d) Security/Chownkidar **(Rs. 50 per day)**											
6	Refreshment to Staff **(Rs. 15 per session & person)**											
	Total											

A) Total Student Strength in Exam Centre (overall) .....

B) Advance Payment received from University: Rs: .....

C) Stationary & Miscellaneous Expenses Rs ..... (Exam Centre to send hard copy of bills only as per University rules)

D) Payment to Chief Coordinator/Principal Rs. .....

E) Payment to Coordinator Rs. .....

ਨੋਟ : ਉਕਤ ਮਾਣਭੱਤਿਆਂ ਦੀ ਅਦਾਇਗੀ ਯੂਨੀਵਰਸਿਟੀ ਦੇ ਪੱਤਰ ਨੰਬਰ **PSOU/Reg./3622** ਮਿਤੀ **07.06.2024** ਮੁਤਾਬਕ ਹੀ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ ਨੂੰ ਕੀਤੀ ਜਾਵੇਗੀ।

Verified by:

Superintendent

Sign:_____

Name:_____

Mobile No:_____

Date:_____

Coordinator

Sign:_____

Name:_____

Mobile No:_____

Date:_____

Chief coordinator/Principal

Sign:_____

Name:_____

Mobile No:_____

Date:_____

College Stamp _____

Forwarded by Exam Branch, JGND PSOU

Sign/Name:.....(Checked by)

Designation :.....

Sign/Name:..... (Verify by)

Designation:.....

ਲੇਖਾ-ਸ਼ਾਖਾ

....

ਕਲਰਕ ਅਕਾਊਂਟੈਂਟ

....

ਅ.ਰਜਿਸਟਰਾਰ

ਮਿਤੀ.....

1. Exam Centre ID :.....
2. Exam Centre Name: .....

JAGAT GURU NANAK DEV PUNJAB STATE OPEN UNIVERSITY, PATIALA

(Examination: Month ...../ Year .....)

P-4 (A)

Bill Performa (Theory Exam) - For Exam Centres having less than 50 Students (overall)

Exam Month/Year	Strength (Mention no. of Students)			Remuneration for LSC Students @Rs.25 (per student) (Column 2x5) – Total	Remuneration for Other LSCs Students Rs. 100+25 = 125 (Column 3x6) Total	Remuneration for University Students Rs. 100+25 = 125 (Column 4x7) Total	Total Bill Amount (in Rs.) as per University letter No. PSOU/Reg./3622 Dated 07.06.2024 (Column 5+6+7)
	Total No. of LSC Students	Total No. of Other LSC Students	University Students				
1	2	3	4	5	6	7	8

A) Total Student Strength in Exam Centre (overall : .....

B) Advance Payment received from University: Rs: .....

C) Stationary & Miscellaneous Expenses Rs ..... (Exam Centre to send hard copy of bills only as per University rules)

ਨੋਟ : ਉਕਤ ਮਾਣਭੱਤਿਆਂ ਦੀ ਅਦਾਇਗੀ ਯੂਨੀਵਰਸਿਟੀ ਦੇ ਪੱਤਰ ਨੰਬਰ **PSOU/Reg./3622** ਮਿਤੀ **07.06.2024** ਮੁਤਾਬਕ ਹੀ ਪ੍ਰੀਖਿਆ ਕੇਂਦਰ ਨੂੰ ਕੀਤੀ ਜਾਵੇਗੀ।

Verified by:

Superintendent

Sign:_____

Name:_____

Mobile No:_____

Date:_____

Coordinator

Sign:_____

Name:_____

Mobile No:_____

Date:_____

Chief coordinator/Principal

Sign:_____

Name:_____

Mobile No:_____

Date:_____

College Stamp _____

Forwarded by Exam Branch, JGNDPSOU

Sign/Name:.....(Checked by)

Designation :.....

Sign/Name:..... (Verify by)

Designation:.....

ਲੇਖਾ-ਸ਼ਾਖਾ

....

ਕਲਰਕ ਅਕਾਊਂਟੈਂਟ

....

ਅ.ਰਜਿਸਟਰਾਰ

ਮਿਤੀ.....

P-5

Jagat Guru Nanak Dev Punjab State Open University, Patiala

Performa For Daily Consumption of Blank Answer-Books (OMR / Theory)

Examination Centre_____Centre Code_____

Examination_____(Month/Year)

Note- One copy of this performa for each category of answer-books duly filled in should be sent to the Controller of Examinations at the End of Examination. The one copy should be retained by the Superintendent for the record.

Date	Session	Type of Answer Bokks (OMR/ Theory 32 Pages)	Answer-Books Received			No of candidatesin the session	Answer-Books Consumed			Balance if any	Signature of theCentre Clerk	Signature of the Centre Superintendent	Verified by Observer / Flying Squad
			No of Answerbooks record.	Serial Nos. of Answer-Books recd.			No of Answer books / Consumed	Serial Nos. of Answer-Books					
				From	To			From	To				
Grand Total													

The above balance of Stock containing Serial Nos. From_____to _____has been re-deposited with the Controller of Examinations, JGNDPSOU by the College (Name): _____

Certified that the opening balance and subsequent sequence shown above is correct and that the charge of the above-noted balance containing serial No.s from_____to _____has been received by me after counting the same.

Submitted to Controller of Examinations, JGNDPSOU

_____ **Superintendent**

_____ **Deputy Superintendent**

_____ **Coordinator**

_____**College Name**

Seal of the / Chief Coordinator/Principal (Institution)

Important--- The superintendent is requested to make entries to total cunsmption in the Account Register of Blank Answer-Books maintained at the institution, strike out the balances of each category in the same register, and intimate to this office the total stock (Category wise) lying at the institution according to the entries made in the register.

JAGAT GURU NANAK DEV
PUNJAB STATE OPEN UNIVERSITY, PATIALA
(Established by Act No.19 of 2019 of Legislature of the State of Punjab)

Performa to be submitted to University after Closing of Exam Centre

Name of Exam Centre:_____Centre Code:_____Session :_____

Sr. no.	Items			OMR			Theory (32 pages)			Practical (10 Pages)		
				From	To	Total	From	To	Total	From	To	Total
1	**Answer Sheets** (Along with serial nos.)	a.	**Issued**									
		b.	**Used** (Excluding Damaged & Discrepancy)									
		c	**Unused** (Excluding Damaged & Discrepancy)									
		d.	**Damaged**									
		e.	**Missing**									
		f.	**Discrepancy in Serial No.**									
			Total (b + c + d + e + f)									
	Stamps (No.) Returned		a) Date Stamp									
			b) Space Below CancelledStamp									
			c) Exam Morning Stamp									
			d) Exam Evening Stamp									
			e) Brass Stamp with wooden handle									

		No. of files	Total No. pages in all files	Remarks
3	**Secrecy Memo cum Students Attendance Sheet (as online generated)** (with page marking)			
4	**Performa of consumption of answer sheets** (with page marking)(P-5 Performa to filled)			

5	**Bags Returned**	Qty =

Verified by:

Superintendent:
Sign:_____
Name:_____
Mobile no:_____

Coordinator:
Sign:_____
Name:_____
Mobile no:_____

Chief. Coordinator/Principal
Sign:_____
Name:_____
Mobile no:_____

*** Note : Use additional sheets if required.**

Received from (for Exam Centre use only):
Name_____
Designation_____
Mobile no:_____

Handed over to (for University use only):
Name_____
Designation_____
Mobile no:_____

Jagat Guru Nanak Dev Punjab State Open University, Patiala

Bill Form for Examiner for Practical Examinations (...../.....)

Center ID:

Name of Exam Centre:

Voucher No: _____
(To be filled by University)

Receipt of payment:-

Sr. No.	Name of Examiner	Designation	Programme	Course Name	Course Code	Exam Date	Total Students Examined	Rate (in Rs.)	Total Remuneration (in Rs.)	Signature of Internal/ External Examiner

Sign. of Coordinator

Certifies That persons names in the bill were actually engaged in the Conduct of practical. Examination during the days noted against the name of each and he/she has worked satisfactory.

Chief Coordinator/Principal
(with Seal)

Note: No Remuneration will be paid unless submission of hard copy of this bill form to the University. Payment will be directly Credit to account of Principal of College.

FOR OFFICIAL USE ONLY

Exam Branch (JGNDPSOU)	For Account Department (JGNDPSOU)	
Checked by Sign _____ Name _____ DEO Verified by Sign _____ Name _____ Sr. Asstt.	Remuneration Paid by me Signature _____ Name _____ Designation _____	Remuneration Rs. _____ Verified & Paid Accountant _____ Superintendent _____ AR (Accounts) _____

JAGAT GURU NANAK DEV PUNJAB STATE OPEN UNIVERSITY, PATIALA

Travelling Allowance Bill

Bank Name .....

Account No .....

PAN NO.....

IFSC CODE .....

Name (in block letters).....
Designation.....
Grade Pay/Declared Income for Non Employees
For T.A. Purpose.....

Purpose of Journey.....
.....
Date of Meeting/Inspection/Exam.etc., (if any).....
Bill Register Page.....Voucher No.....

Departure			Arrival			Mode of Journey	Distance for Road Mileage		Amount	
Station	Date	Time	Station	Date	Time		K.M.	Rate	Rs.	Paise

1. Mode of Journey
NOTE:- Deluxe/A.C.Bus/1st Class Rail/Air (Tickets attached)
(a) By Rail: Class.....Ticket No.....
(b) By Bus: (Ord./Deluxe/A.C.).....
(c) Own Car/Staff Car/Taxi No.....
(d) By Air: Ticket No.....

2. Halting days.....@..... .....
3. Journey days.....@..... .....
4. Local Conveyance, if any
(Details on Separate Sheet) .....

Total

Declaration: Certificated that –
(i) Particulars provided herewith are correct & that I have not claimed T.A./D.A. etc. for this Journey from any other public source
(ii) I was not provided free lodging and/or boarding at the cost of Govt./University or any autonomous body.
(iii) I travelled in the class of accommodation to which I am entitled.
(iv) I was present at the Duty point on the days for which the D.A. has been claimed.
(v) The Mileage claimed is correct to the best of my knowledge and information.
(vi) Certificate for Payment at the Spot.

Certified that I shall perform the return journey from .....to ..... by the same mode as claimed in the T.A. bill.

Signature *.....
Address.....
.....
Countersigned .....

Controlling Officer

Received Payment

Affix Re.1. Revenue Stamp if amount exceeds Rs.5000/-

Signature*.....
(*Please Sign at both the places).

For use in Account Branch

Head of Account/Code No.....
Pay Rs. (in figures).....(in words).....
.....

Clerk Asstt. Supdt.

For Audit Use

Seen: (i) Sanction (ii) T.A. Check Register
(iii) Attendance (iv) Budget Register/Grant Register

Pay Order

AUDIT DEPARTMENT

Preaudited & Passed for Rs.....
Rupees.....
.....
Auditor

Audit Office
J.G.N.D.P.S.O.U

Cheque No.....
Date:.....

Pay Order verified
.....
Clerk/Asstt.

(Payment regarding TA will be Rs. 9/km as per University Norms)

JAGAT GURU NANAK DEV
PUNJAB STATE OPEN UNIVERSITY,PATIALA

(Established by Act No.19 of 2019 of Legislature of the State of Punjab)

RECEIVING PERFORMA (INDEX) – Theory & Practical Answer Books

(To be used by Exam Centre for Submission of Answer Books & Boras/Packets to University)

Exam Centre ID:_____ City:_____

Name of Exam Centre:_____

Date of receiving from Exam Centre:_____

Details of Answer Books (OMR /Theory-32 Pages):

Sr.No	Date	Type of Answer Books (OMR / Theory- 32 Pages)	Total no. of Answer Books	Bag (Packet)		
				Sr. No. of packets	No. of packets (Morning Session)	No. of packets (Evening Session)
1						
2						
3						
4						
5						
6						

a) **Main Total Boras (OMR Answer Books) :.....**

b) **Main Total Boras (Theory Answer Books -32 Pages) :.....**

(To be filled by Exam Centre/College)	(Only for University use)
Submitted by:	Received by:
Sign:_____	Sign:_____
Name:_____	Name:_____
Designation:_____	Designation:_____
Mobile No._____	Deptt. /Branch of University:_____
Date:_____	Date:_____

Forwarded by.

Chief Coordinator/Principal of Exam Centre

Sign with Stamp._____

Date._____

Name_____

Mobile No._____

- **This Performa may be updated (as required) by respective Exam Centre**