

Centre for Continuing Education Indian Institute of Technology Kanpur

New Course Account Opening Form

Course title	
Sponsoring agency/Self Financed Fees	
Is there any agreement/MoU? (Tick one)	Yes/ No
Total amount sanctioned	
Course account type (Tick one)	Conference/Courses/Workshop/Symposium/Seminar Any other (please specify) _____

Name of the CC		Mob No.																	
Name of the Co- CC		Mob No.																	
Account to be operated by (Tick one)	Only by CC / Either CC or Co-CC																		

Enclosures: Sanction letter, copy of agreement/MoU, any other relevant correspondence.

Signatures

Course Coordinator	Co- Course Coordinator
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* **Note:** Overheads will be deducted as per the CCE Rules.

For Office Use

Type of agency (Tick one)	Funding agency/ Research organisation/ Ministry/Private/ Any other (please specify) _____																		
Remarks																			
Course account number																			
Supervised	Approved																		
Assistant / Superintendent	Head, CCE																		