



# Indian Institute of Technology Kanpur

## Centre for Continuing Education

### ADVANCE FOR SHORT TERM COURSE UNDER CCE

1. Course Account No.: \_\_\_\_\_
2. Title of the Course : \_\_\_\_\_
3. Name of Course Coordinator : \_\_\_\_\_ P.F. No. \_\_\_\_\_
4. Advance Holder Name : \_\_\_\_\_ P.F. No. \_\_\_\_\_
4. Department / Programme : \_\_\_\_\_
5. Course Duration: From : \_\_\_\_\_ To: \_\_\_\_\_
6. Amount of advance requested: \_\_\_\_\_
7. Bank details of Advance Holder: (i) Beneficiary Name: \_\_\_\_\_  
(ii) Account No. \_\_\_\_\_  
(iii) Bank Name: \_\_\_\_\_  
(iv) IFS Code: \_\_\_\_\_

#### **For Office Use Only**

Amount Already Drawn: \_\_\_\_\_

Balance Amount: \_\_\_\_\_

Advance Amount: \_\_\_\_\_

\_\_\_\_\_  
Accountant

\_\_\_\_\_  
Superintendent

\_\_\_\_\_  
Signature of Course Coordinator(s)

Date:     /     /

Approved / Not Approved

\_\_\_\_\_  
Head, CCE