



# OFFICE OF THE CONTROLLER OF EXAMINATIONS UNIVERSITY OF CHITRAL KPK

## EXAMINATIONS REMUNERATION FORM

Name of Claimant: \_\_\_\_\_ Designation: \_\_\_\_\_  
College/Institute: \_\_\_\_\_ BPS: \_\_\_\_\_ (attach last month pay slip)  
Appointment Letter No. \_\_\_\_\_ Dated: \_\_\_\_\_  
Center Name: \_\_\_\_\_ Center No. \_\_\_\_\_  
Appointed by University as \_\_\_\_\_ and Worked \_\_\_\_\_ days.  
Examination: \_\_\_\_\_ (A / S / Semester) Cell No. \_\_\_\_\_

Description	No. of days/Candidates	Remuneration/day(Candidate)	Amount (Rs.)
Supdt. /Dy.Supdt. /Asstt. Supdt.			
Resident Inspector/External Inspector			
Supporting Staff			
No. of Candidate (For Thesis Evaluation/ Viva-Voce /For Practical Examiner)			
Contingent Expenses (attach receipts)			
Others: _____			
<b>Total</b>			

Bill is presented for payment of Rs. \_\_\_\_\_ (Repees \_\_\_\_\_ only)

### INFORMATION REQUIRED FOR PAYMENT PURPOSE

Claimant's Name	Account No.	Bank Name (Branch)	Bank Code No.

\_\_\_\_\_  
Signature of the Claimant

\_\_\_\_\_  
Signature of the Supdt. With Stamp

**FOR OFFICE USE ONLY**

**Prepared by**

**Verified by**

**Recommended by**

\_\_\_\_\_  
Bill Assistant

\_\_\_\_\_  
ACE/DCE

\_\_\_\_\_  
Controller of Examinations

**Checked by**

\_\_\_\_\_  
Senior Auditor

### Rate of Remuneration

S/No.	Description	Remuneration	Min./Max. Amount (Rs.)
01	Superintendent	Rs. 1500/working day	
02	Deputy Superintendent	Rs. 1200/working day	
03	Assistant Superintendent	Rs. 1000/working day	
04	Resident Inspector	Rs. 500/working day	Max. Rs. 5000
05	External Inspector	Local =Rs. 1500/- Nonlocal =Rs. 500+TA/DA	
06	Thesis / Research / Project (All master levels research project/thesis, internship)	Evaluation = Rs. 800/Thesis Viva-Voce = Rs. 400/Candidate	
07	Practical Examiner / Viva-Voce	Rs. 50/Candidate	Min. Rs. 1000/-
08	Supporting Staff	Rs. 250/working day	

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