

## MAHARAJA AGRASEN COLLEGE

# (UNIVERSITY OF OELHI)

Payment	of	Guest	Lecturer	for	the	Month	of _		
I				h	ave de	elivered		lectures as per	details given
below.	I	was	appointed	as	Gu	iest L	.ecturer	w.e.f	till

## Name of Course(s) Assigned for teaching

Name of Course (Year Wise)	Paper Taught	Total Number of Students in the Course (Assigned)

#### Lecture(s) Delivered

Date of Lectures Held	Room No	Course	Number of Students
			Course Attended

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Date

**Yours Sincerely** 

Signature of Guést Teacher

Certify that Mr/Ms/Dr. \_\_\_\_\_\_has delivered \_\_\_\_\_\_ lectures in the month of \_\_\_\_\_\_2022. The above details submitted by the Guest teacher is verified. Payment may be released.

#### Name and Signature of TIC

Above attendance of Guest **Teacher** is verified from Attendance register (copy enclosed) Payment may be released.

Dealing Assistant

Section Officer (Administration)