

INDIAN MEDICINE AND HOMOEOPATHY



THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

No. 69, Anna Salai, Guindy, Chennai - 600 032.

T.A. BILL OF MEMBERS OF INSPECTION COMMISSION APPOINTED TO INSPECT INSTITUTION / COLLEGE FOR GRANT OF AFFILIATION

1. a) Name & Designation of the Convenor / Member (IN BLOCK LETTERS) :
- b) Mobile Number :
- c) E-mail I.D. :
2. Institution in which working (with full Address and Phone No.) (IN BLOCK LETTERS) :
3. University's Ref. No. & Date of Order of Appointment of Inspection Commission :
4. Purpose of Inspection : To Issue Certificate of Registration / To Grant Provisional Affiliation / To Grant Continuance of Provisional Affiliation / To Increase Seats / Full Affiliation
5. Name of the Institution / college Inspected : 1.
(Ayurveda / Siddha / Unani / Homoeopathy / 2.
Naturopathy and Yogic Science) 3.
4.
6. Name of the Course for which the inspection was conducted :
7. Date of Inspection :
8. Details of Journey :

Dates and Hours of Journey	Number of Kms. Travelled			From	To	Amount	
	Mode of Travel	Class	Kms.			Rs.	P.

Reservation Charges	Rs.
Development Charges	Rs.
*Honorarium	Rs.
*Halting Allowance	Rs.
*Conveyance	Rs.
Total	Rs. _____

9.

Bank Name operated by the Examiner / Inspector	Bank Branch Address	A/c Type	A/c No.	IFS Code

