

	<p align="center"><b>Dr. N.G.P. ARTS AND SCIENCE COLLEGE</b>          (An Autonomous Institution, Affiliated to Bharathiar University, Coimbatore)          Approved by Government of Tamil Nadu and Accredited by NAAC with 'A' Grade (2<sup>nd</sup> Cycle)          Dr. N.G.P. – Kalapatti Road, Coimbatore-641048, Tamil Nadu, India          Web: <a href="http://www.drngpasc.ac.in">www.drngpasc.ac.in</a>   Email: <a href="mailto:info@drngpasc.ac.in">info@drngpasc.ac.in</a>   Phone: +91-422-2369100</p>	<p align="center"><b>NAAC</b> <b>3<sup>rd</sup> Cycle</b></p>
		<p align="center"><b>Criterion VI</b> <b>Metric 6.3.2</b></p>

**AY 2016 – 17: Teachers provided with financial support to attend conferences workshops and membership fees of professional bodies**

The following are the list of supporting documents for number of faculties received financial support to attend Conference and workshops and membership fees of professional bodies for the academic year 2016-17:

S. No.	Details
1	List of Faculty
2	Approval Letter





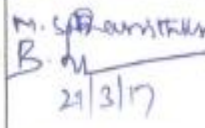




# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Dr. N.G.P. – Kalapatti Road, Coimbatore-641048, Tamil Nadu, India  
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3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

## 1. List of Faculty

Financial support to attend conferences/ workshops and towards membership fee of professional bodies during the academic year 2016-17				
S.No.	Name of teacher	Name of conference/ workshop attended/ professional body for which financial support provided	Amount of support	Signature
1	Dr.S. Saravanan	Workshop on Multivariate Analysis Using Spss & Amos	3,000.00	
2	Dr.S.S. Sudha	Workshop on out come based education for HEI	2,000.00	
3	Dr.S.S. Sudha Dr.M.S.Ranjith Kumar Dr.D.B.Satheeshkumar Dr.D.Geetharamani Dr.Usha Veeraragavan	Seminar on Curriculum Design for sustainable and Scooital Development	4,000.00	
4	Mr.Ruknathan Ms.Nithya	Seminar Confederation of Indian Industries	1,380.00	
5	Mr.R.Rajesh Kanna	Webinar onFihical Hacking and Web Application security	1,600.00	
6	Dr.S.S. Sudha Dr.B.Roslme Jeetha De.Usha Veeraragavan Mrs.V.KrishnaPrabhu Mr.B.Rajesjkanna	Conference on Higher Education	12,500.00	 





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3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

7	Dr.S.S. Sudha Jeetha Dr. Usha Verrarguvan	Dr.H.Rosline Dr.B.Satheesh Kumar	Workshop on out come Based Education	2,000.00	S.S. Sudha B. Jeetha 3/3/13
8	Mr.R.Rajesh Kanna		Workshop on Flipped Classroom Methodology	2,400.00	R.Rajesh 3/3/13
9	Ms.Jayathi		Conference	8,177.00	S. Jayathi 3/3/13
10	Dr.S.S. Sudha		National Seminar on Curriculum Designing and Skill based education	3,455.00	S.S. Sudha 3/3/13
11	Mr.B.Narasimhan		Conference on ICTACT	500.00	B. Narasimhan 3/3/13
12	Dr.S.S. Sudha		Conference on New Approaches to learning	5,072.00	S.S. Sudha 3/3/13
13	Mr.N.Kumar		Workshop on Value Education	400.00	N. Kumar 3/3/13



M. R. Muthuswamy  
3/3/13  
Dr. P.R. MUTHUSWAMY  
PRINCIPAL  
Dr. N.G.P. Arts and Science College  
Dr. N.G.P. - Kalapatti Road  
Coimbatore - 641 048  
Tamilnadu, India





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

## 2. Approval Letter

Coimbatore  
6<sup>th</sup> July 2016

**From**  
Dr.S.Saravanan,  
Professor in Commerce with Information Technology,  
Dr.N.G.P Arts and Science College,  
Coimbatore-48.

**To**  
The Madam Secretary,  
Dr.NGP Arts and Science College,  
Coimbatore-48.

**Through**  
The Principal,  
Dr.N.G.P Arts and Science College,  
Coimbatore.

Respected Sir,

**Sub: Requisition of financial assistance for attending Research Workshop -Reg**

I would like to bring to your kind information that I am going to attend **Workshop on Multivariate Analysis Using SPSS & AMOS** at Kongu Engineering College, Perundurai from 5<sup>th</sup>,6<sup>th</sup> & 7<sup>th</sup> August, 2016. In this connection I am in need of financial assistance of Rs 3000 (Three Thousand only) towards the payment of Registration fee. I Request you to kindly permit me for the same and do the needful.

Thanking you,  
Yours truly,  
*S. Saravanan*  
(Dr.S.Saravanan)

Encl: Copy of Invitation

192807

14/7/16

"Bills/Letter/Document Received on"  
(a) Name *Subini*  
(b) Signature *[Signature]*

*Megha*

"Payment Particulars"  
Account No. DD No. 957807  
Date  
Branch

"Bill Passed for Payment"  
(a) Amount Passed - 3030/-  
(b) Amount Paid (onferenced seminar) Exp  
(c) Credit Period / Immediate Payment  
(d) Payment Due Date  
(e) Journal No & Date  
Prepared by Checked by Passed by Approved by





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

Voucher No: 590/27/16 **PAYMENT VOUCHER** Date: 8/11/16

Paid to: V/S for DO.

Particulars: Towards amount paid to workshop on Multivariate Analysis Using SPSS & AMOS at Kongu Eng College

Amount: Rupees Three thousand thirty only

Bank: Cash / Cheque No. 952807

Account Head: Conference & Seminar Exp - 3000

Rs 3030/- DOC hangy - 30 Received the above amount by Cash / Cheque 3030-

Prepared by Eg Entered by [Signature] Passed by [Signature] Approved by [Signature] Signature [Signature]





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

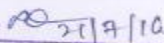
(An Autonomous Institution, Affiliated to Bharathiar University, Coimbatore)  
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Dr. N.G.P. – Kalapatti Road, Coimbatore-641048, Tamil Nadu, India  
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NAAC  
3<sup>rd</sup> Cycle


Criterion VI  
Metric 6.3.2

Coimbatore  
15.07.2016

From  
Dr.S.S.Sudha  
Professor & Head  
Department of Microbiology  
Dr.N.G.P.Arts and Science College  
Coimbatore

"Bills/Letter/Document Received on" 21/07/16	
(a) Name	Konitha
(b) Signature	 21/7/16


To  
The Principal  
Dr.N.G.P.Arts and Science College  
Coimbatore

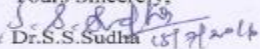
  
20/7

Respected Sir,



Sub: Requisition -Participation - CII Workshop & Registration Fee - reg

I have been given a chance to participate in One day Workshop on "Out come based education for HEI" on 6<sup>th</sup> August 2016 at Hotel Residency Towers, Coimbatore. I kindly request you to permit me to attend and provide me with the registration fee of Rs 2000/- . I herewith enclosed the communication for your consideration.

  
Thanking you,  
Enclosure: CII communication

Yours Sincerely,  
  
Dr.S.S.Sudha

123787

"Bill Passed for Payment"	
(a) Amount Passed	2000/-
(b) Account Head	Conference & Seminars Expenses
(c) Credit Period / Immediate Payment	/ Assign - Payment
(d) Payment Due Date	8/8
(e) Journal No & Date	22/7/16
Prepared by	
Checked by	
Passed by	
Approved by	





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

**PAYMENT VOUCHER** Date: 2/8/16

Voucher No: *695/2-8/16*

Paid to: *S.S. Sudha*

Particulars: *To & paid for conference - 'Outcome based edu. for HEI' on 6<sup>th</sup> Aug 2016 at Hotel Residency Towers.*

Amount : Rupees *Two Thousand Only*

Bank : Cash / Cheque No. *123789*

Account Head : *Conference and Seminar Expenses*

Rs *2000/-*

Received the above amount by Cash / Cheque

Prepared by: *[Signature]* Entered by: *[Signature]* Passed by: *[Signature]* Approved by: *[Signature]* Signature: *S.S. Sudha 2/8/16*





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Web: www.drngpsc.ac.in | Email: info@drngpsc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

03/07/16

"Bills/Letter/Document Received on"
(a) Name <u>Kanikaa</u>
(b) Signature <u>[Signature]</u> 03/07/16

Date : 22.07.2016  
Coimbatore

From  
Dr. S.S. Sudha,  
CDC – Co-ordinator,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore - 641048.

Through  
The Principal,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

To  
Madam Secretary,  
UGC – Human Resource Development Centre,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

Respected Madam,

Sub.: Request for Registration fee- NAAC sponsored National Seminar -Curriculum Design and Development –Amrita University- reg.

National Seminar on Curriculum Design and Development for sustainable and Societal Development –A Road Map, is to be organized by Amrita University during 12<sup>th</sup> and 13<sup>th</sup> August 2016. To this programme a total of five faculty members from our college are planning to participate. In this regard I kindly request you to permit and sanction registration fee of Rs 800 (5\* 800= 4000/- Rupees **four thousand** only) for the participants listed below

1. Dr.S.S.Sudha
2. Dr.M.S.Ranjith Kumar
3. Dr.B.Satheesh Kumar
4. Dr.D.Geetha Ramani
5. Dr.Usha Verraragavan

I have enclosed the Boucher for reference.

Thanking you,

Yours Sincerely,  
[Signature]  
22/7/2016

123823

DD 4000  
Com 30  
4,030

[Signature]  
28/7/16







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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

**PAYMENT VOUCHER**

Voucher No: 730/4816 Date: 4/8/16

Paid to: Yoursel for D.D

Particulars: To's amt paid for National Seminar on Curriculum Des.gn & Development - Annita University on 12<sup>th</sup> & 13<sup>th</sup> Aug. 16.

Amount : Rupees Four Thousand & Thirty Only

Bank : Cash / Cheque No. 103898 DD - 4000  
COM - 30

Account Head : National Seminar & Conference Exp 4030

Received the above amount  
by Cash / Cheque

Rs 4030/-

Prepared by [Signature] Entered by [Signature] Passed by [Signature] Approved by [Signature] Signature





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3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

26/9/16

Bills/Letter/Document Received  
 (a) Name: Dr. N.G.P. Institute / K.M.C.H  
 (b) Signature: [Signature]

617.

**CONFEDERATION OF INDIAN INDUSTRIES**  
 COIMBATORE ZONAL OFFICE  
 Unit No. B-3A - 1, 2nd Floor, "Elysium Central"  
 Opp. to Carmel Garden School, Pullakulam Mai  
 Coimbatore - 641 045. Ph : 0422-4044555  
 Fax : 0422-4044555 E-mail : cli.coimbatore@cii.

Date : 26/5/16

M/s. DR. N.G.P. Institute / K.M.C.H

Particulars	Amount in
<p>IWN - Session on "Finance for Non-Finance Professionals Prog. on 20/05/2016</p> <p style="text-align: right; font-size: 1.2em;">690x2</p>	1380.
<p><u>One Thousand Three hundred and eighty only</u></p>	1380.00

26/9/16

REGIONAL DIRI





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

Voucher No: 102/29/9/16 **PAYMENT VOUCHER** Date: 29/9/16

Paid to : Confederation of Indian Industries

Particulars : Towards amount paid for Conference and Seminar Expenses on 26-5-16

Amount : Rupees One thousand three hundred and eighty only

Bank : Cash / Cheque No. 141638

Account Head : Conference & Seminar Expenses

Rs 1380/-

Received the above amount by Cash / Cheque

Prepared by [Signature] Entered by [Signature] Passed by [Signature] Approved by [Signature] Signature M. Jini Malek





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

From  
R.Rajeshkanna  
Coordinator  
Center for E-Learning  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

To  
The Madam Secretary  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

Through  
The Principal  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

07.11.2016  
9/11/16  
9/11/16  
9/11/16

Letter/Document Received by  
(a) Name: Rajeshkanna  
(b) Signature: Rajeshkanna

Respected Madam

Subject : Webinar- Ethical Hacking & Web application security registration fee- reg

This is to bring to your kind notice that the CII conducts webinar in "Ethical Hacking and Web application security" on 8<sup>th</sup> and 9<sup>th</sup> November 2016 during 3.00 pm to 5.00 pm. So kindly I request you to sanction Rs 1600 for registration fee. Please the needful.

Thanking you

Yours faithfully  
Rajeshkanna  
(R.Rajeshkanna)

9/11/16  
9/11/16  
9/11/16






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3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

 **Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

Voucher No: 1183 **PAYMENT VOUCHER** Date: 11/11/16

Paid to : Self

Particulars : Towards amount Paid to Ethical Hacking and web application security on 8<sup>th</sup> & 9<sup>th</sup> Nov-16

Amount : Rupees One thousand Six hundred only.

Bank : Cash / Cheque No. 357372

Account Head : Conference & Seminar Exp

Rs 1600/-

Received the above amount by Cash / Cheque

Prepared by *[Signature]* Entered by *m.h.t.* Passed by *[Signature]* Approved by *[Signature]* Signature



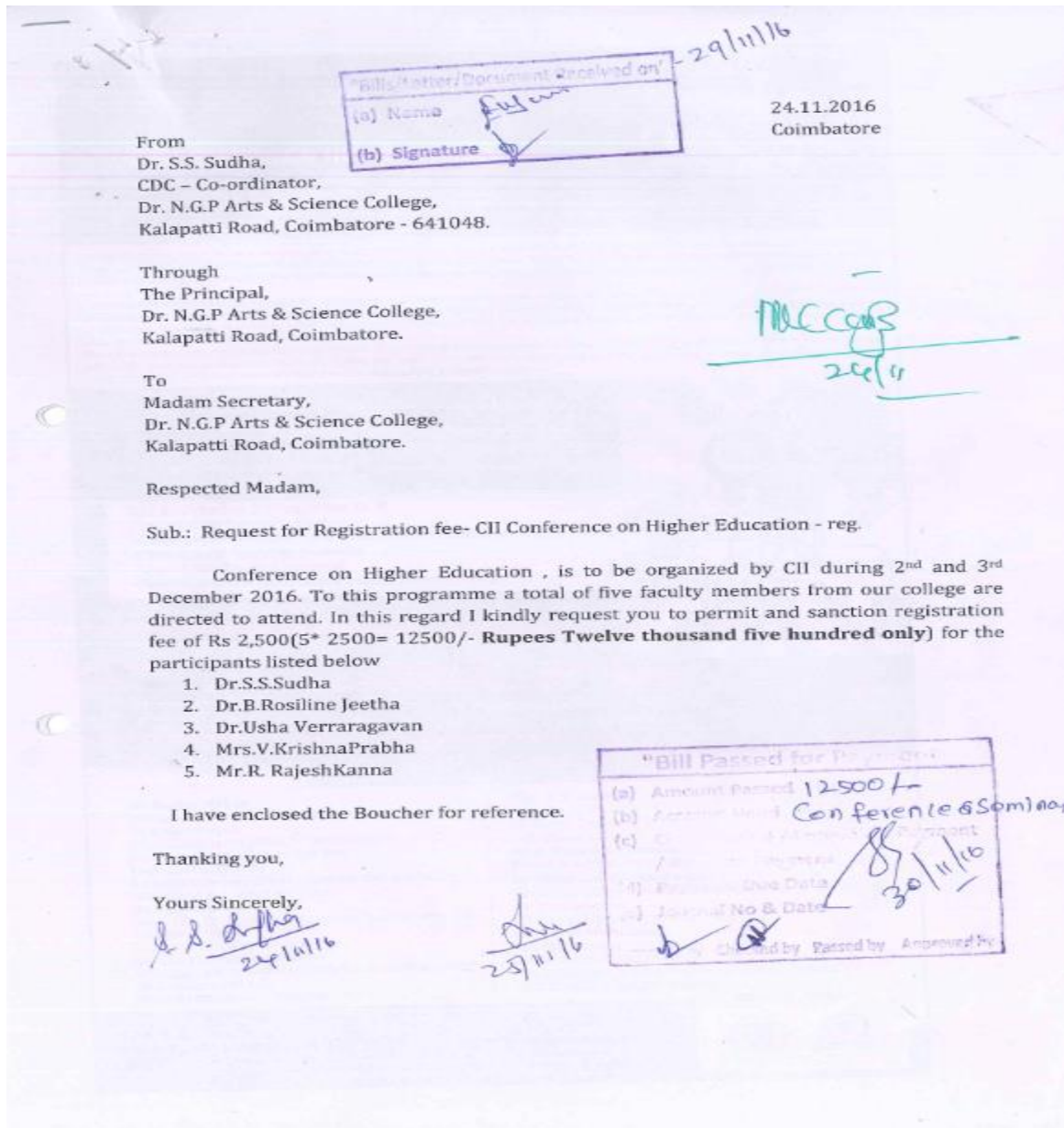


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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2



"Bills/Order/Document received on" 29/11/16  
(a) Name  
(b) Signature

24.11.2016  
Coimbatore

From  
Dr. S.S. Sudha,  
CDC – Co-ordinator,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore - 641048.

Through  
The Principal,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

To  
Madam Secretary,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

Respected Madam,

Sub.: Request for Registration fee- CII Conference on Higher Education - reg.

Conference on Higher Education , is to be organized by CII during 2<sup>nd</sup> and 3<sup>rd</sup> December 2016. To this programme a total of five faculty members from our college are directed to attend. In this regard I kindly request you to permit and sanction registration fee of Rs 2,500(5\* 2500= 12500/- Rupees Twelve thousand five hundred only) for the participants listed below

- 1. Dr.S.S.Sudha
- 2. Dr.B.Rosiline Jeetha
- 3. Dr.Usha Verraragavan
- 4. Mrs.V.KrishnaPrabha
- 5. Mr.R. RajeshKanna

I have enclosed the Boucher for reference.

Thanking you,

Yours Sincerely,  
*S.S. Sudha*  
29/11/16

*S.S. Sudha*  
29/11/16

"Bill Passed for Payment"  
(a) Amount Passed 12500/-  
(b) Amount Used Conference @ Somnath  
(c) ...  
(d) ...  
(e) ...  
30/11/16





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Dr. N.G.P. ARTS AND SCIENCE COLLEGE	
Kalapatti Road, Coimbatore - 641 048.	
Voucher No: 1236	<b>PAYMENT VOUCHER</b> Date: 30/11/16
Paid to	Confederation of Indian Industry
Particulars	Towards amount paid to C.I.I. Conference, Higher Education Registration fees on Dec-16-2016
Amount	: Rupees Twelve thousand five hundred only.
Bank	: Cash / Cheque No. 357609
Account Head	Conference & Seminar Expenses
Rs 12500/-	Received the above amount by Cash / Cheque
Prepared by	Entered by
	Passed by
	Approved by
	Signature





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

09.12.2016  
Coimbatore

From  
Dr. S.S. Sudha,  
CDC – Co-ordinator,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore - 641048.

Through  
The Principal,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

To  
Madam Secretary,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

Respected Madam,

Sub.: Request for Registration fee-Workshop on Outcome based Education - reg.

NAAC sponsored Workshop on Out Come Based Education during 15<sup>th</sup> and 16<sup>th</sup> December 2016, is to be organized by PSGR Krishnammal college for women. To this programme a total of four faculty members from our college are suggested to attend. In this regard I kindly request you to permit and sanction registration fee of Rs 500(4\* 500= 2000/- **Rupees two thousand only**) for the participants listed below

1. Dr.S.S.Sudha
2. Dr. B.Satheesh Kumar
3. Dr.B.Rosiline Jeetha
4. Dr.Usha Verraragavan

I have enclosed the Boucher for reference.

Thanking you,

Yours Sincerely,  
*S. S. Sudha*  
9/12/16

*Du*  
*du*  
10/12/16

2000  
30  
2030







# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Dr. N.G.P. – Kalapatti Road, Coimbatore-641048, Tamil Nadu, India  
Web: www.drngpasc.ac.in | Email: info@drngpasc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

Voucher No: 1266 **PAYMENT VOUCHER** Date: 12-12-16

Paid to: Y.L.S. For DL

Particulars: Towards Grant paid to the NAAC sponsored workshop on out come Based education during 15<sup>th</sup> and 16<sup>th</sup> Dec

Amount: Rupees Two thousand Thirty only

Bank: Cash / Cheque No. 357463

Account Head: Conference & Seminars Expenses

Rs	<u>2030/-</u>	<u>2000</u> Received the above amount <u>30</u> by Cash / Cheque <u>2030</u>
----	---------------	--

Prepared by: [Signature] Entered by: [Signature] 12/12/16 as charges Passed by: [Signature] Approved by: [Signature] Signature: [Signature]





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

10.11.2016

From: R.Rajeshkanna  
Assistant Professor  
Department of Computer Applications  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

To: The Secretary  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

Through: The Principal  
Dr.N.G.P. Arts and Science College(Autonomous)  
Coimbatore

Respected Madam

Subject: Flipped Classroom methodology Workshop registration fee- reg

This is to bring to your kind notice that Karunya School of Management conducts One-Day National Level Experimental Workshop in "Flipped Classroom Methodology" on 12<sup>th</sup> November 2016. So kindly I request you to sanction Rs 2400 ( 3 faculty member 3 \* 800) for registration fee. Please do the needful.

Thanking you

Yours faithfully  
Rajeshkanna

*Handwritten notes:*  
17 Ret  
21 Cert  
Forwarded  
10/12/2016  
Bill/Letter/Document Received on  
(a) Name M. Hanath  
(b) Signature M.A.  
"Payment Particulars"  
357430  
"Bill Passed for Payment"  
Rs 2400/-  
conference & seminar Exp  
10/12/16  
800 x 3 = 2400  
12/11/16





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

**Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

**PAYMENT VOUCHER**      Date: 10/12/16

Voucher No: 1268

Paid to: R. Rajesh kanna

Particulars: Towards Amount paid to the National Level Experimental workshop in "Flipped classroom methodology" on 10<sup>th</sup> Nov 2016.

Amount: Rupees Two thousand Four hundred only.

Bank: Cash / Cheque No. 357470

Account Head: Conference & Seminar Expenses

Rs 2400/-

Received the above amount by Cash / Cheque

Prepared by: M.A.      Entered by: M.A.      Passed by: [Signature]      Approved by: [Signature]      Signature: [Signature] 20/12/16





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Coimbatore  
03.11.2016

From  
S.Jayanthi  
Course Coordinator  
Department of Medical Physics  
Dr.NGP Arts and Science College  
Coimbatore.

To  
The Secretary  
Dr.NGP Arts and Science College  
Coimbatore.

Through  
The Principal  
Dr.NGP Arts and Science College  
Coimbatore.

Respected Madam,

Sub: Requesting for sponsorship to attend AMPI Conference

I Mrs. Jayanthi.S working as Assistant Professor in Medical Physics department. All our I and II M.Sc., Medical Physics students are going to attend the conference in AMPICON 2016 Hyderabad from 18<sup>th</sup> to 20<sup>th</sup> November 2016. As I have responsibility on our students, I wish to accompany with them for attending the conference. I request the management to sponsor for the following

1. Registration fee		Rs.2500
2. Accommodation	Rs. 900X3=	Rs.2700
3. Travel expense - Hyderabad- Coimbatore		Rs. 1663
Coimbatore - Hyderabad		Rs.1314
<b>Payment Particulars</b>		<b>Rs. 8177</b>

Thanking you.

Yours faithfully,  
S.JAYANTHI

11/18/16

18-11- Friday  
19-11- Satur  
20-11- Sunday

Association of Medical Physicists of India

1) List of Training Staff & Students.  
2) Proof for having registered for conference  
3) Hotel Accommodation Booking  
4) To & Fro. Ticket receipt

10/11/16

Forwarded  
MCCCB  
3/11

1663  
1314  
2977

2500  
2700  
5200

1663  
1314  
2977

41/11/16





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Web: www.drngpsc.ac.in | Email: info@drngpsc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Dr. N.G.P. ARTS AND SCIENCE COLLEGE	
Kalapatti Road, Coimbatore - 641 048.	
Voucher No: 1657	<b>PAYMENT VOUCHER</b>
Date: 20.2.18	
Paid to: S. Jayanthi	
Particulars: Towards amount paid for Depart. medical Phys. Sias. Conference on 18th to 20th Nov-16.	
Amount: Rupees Eight thousand one hundred and Seventy Seven only.	
Bank: Cash / Cheque No. 954729	
Account Head: Conference and Seminar Expenses	
S. Jayanthi Advance	
Rs 8177/-	Received the above amount by Cash / Cheque
Prepared by: [Signature]	Entered by: [Signature]
Passed by: [Signature]	Approved by: [Signature]
	Signature: [Signature]





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Web: www.drngpsc.ac.in | Email: info@drngpsc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

From  
Dr. S.S. Sudha,  
CDC – Co-ordinator,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore - 641048.

01.02.2017  
Coimbatore

6/2/17

Bill/Order/Document Recd. No.
To Name <i>fuzer</i>
To Signature <i>b</i>

Through  
The Principal,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

To  
Madam Secretary,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

Respected Madam,

**Sub.:** Request for Registration fee- National Seminar- reg.

NAAC Sponsored two day national seminar on curriculum designing and skill based education is to be organized by Ayya Nadar Janaki Ammal College during 16<sup>th</sup> & 17<sup>th</sup> February 2017. Two faculty members from our college are directed to attend this programme. In this regard I kindly request you to permit and sanction registration fee, travel & accommodation expenses for the same.

1. Dr.S.Mohan
2. Dr.J.Renga Ramanujam

Registration Fees Rs.300/- (2\*300 = 600); Accommodation and travel expenses for two person : Rs.5000/- (For Two Days)  
Total : Rs.5600/- (Six Thousand Six Hundred Only)

I have enclosed the Boucher for reference.

Thanking you,

Yours Sincerely,

*S.S. Sudha*  
1/2/17

*Boucher*

*6/2/17*

*J. Jagan*  
*6/2/17*  
*forwarded me 6/2*





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Dr. N.G.P. – Kalapatti Road, Coimbatore-641048, Tamil Nadu, India  
Web: www.drngpasc.ac.in | Email: info@drngpasc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Dr. N.G.P. ARTS AND SCIENCE COLLEGE	
Kalapatti Road, Coimbatore - 641 048.	
Voucher No: 1611	<b>PAYMENT VOUCHER</b> Date: 9.2.17
Paid to: S.S. Sudha	
Particulars: Towards Registration fees for National Seminar on 16th & 17th Feb-17, Sivakasi	
Amount: Rupees five thousand six hundred only	
Bank: Cash / Cheque No. 954694	
Account Head: S.S. Sudha Advance	
Rs 5600/-	Received the above amount by Cash / Cheque
Prepared by	Entered by
	Passed by
	Approved by
	Signature





## Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Web: www.drngpasc.ac.in | Email: info@drngpasc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

23<sup>rd</sup> June 2016  
Coimbatore

From  
B.Narasimhan  
Coordinator  
Entrepreneurship Development Cell  
Dr. N.G.P. Arts and Science College  
Coimbatore.

To  
The Madam Secretary  
Dr. N.G.P. Arts and Science College  
Coimbatore.

Through  
The Principal  
Dr. N.G.P. Arts and Science College  
Coimbatore.

Respected Madam.

Subject: Participation in ICTACT Bridge 2016 Coimbatore Edition and Reimbursement of Registration Fees – Regarding.

ICTACT conducted Bridge 2016 Event on 22<sup>nd</sup> June 2016 at Coimbatore with the theme 'Igniting Startup India'. I have attended the event and I request you to reimburse the Registration Fee of Rs. 500 (Five Hundred Rupees).

Thanking you.

Yours sincerely,  
  
B. Narasimhan.  
23/6/16

- Encl:
1. ICTACT Bridge 2016 Invitation
  2. Registration Fee Receipt







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Web: www.drngpasc.ac.in | Email: info@drngpasc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2



**ICT Academy of Tamil Nadu**  
Elcot Complex, 2-7 Developed Plots, Industrial Estate,  
Perungudi, Chennai - 600 096. Ph : 044 - 4290 6800 Fax. 044 - 4290 6820

## RECEIPT

No. 1782

Date: 22.06.2016

Received with thanks from Dr NUP Arts and Science  
College

a sum of Rs 500/- (Rupees five  
Hundred only)

towards Bridge Conference Registration Fee 1 x 500

Cash / D.D. / Cheque No. : \_\_\_\_\_ Date \_\_\_\_\_

Bank \_\_\_\_\_

Rs. 500/-

For ICT Academy of Tamil Nadu

Authorised Signatory

Cheques Subject to Realisation





# Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

From  
Dr. S.S. Sudha,  
CDC – Co-ordinator,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore - 641048.

01.02.2017  
Coimbatore



Through  
The Principal,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

To  
Madam Secretary,  
Dr. N.G.P Arts & Science College,  
Kalapatti Road, Coimbatore.

*Handwritten signature*

Respected Madam,

**Sub.:** Request for Registration fee- Conference New Approaches to Learning Outcomes and Assessment under Choice Based Credit System - reg.

Conference on New Approaches to Learning Outcomes and Assessment under Choice Based Credit System is to be organized by ST. Joseph's College of Commerce during 10<sup>th</sup> February 2017. To this programme two faculty members from our college are directed to attend. In this regard I kindly request you to permit and sanction registration fee, travel & accommodation expenses for the same.

1. Dr.M.Jagadesh
2. Dr.S.Mohan Raj

Registration Fees Rs.800/- (2\*800 = 1600); Accommodation and travel expenses for two person : Rs.5000/-  
Total : Rs.6600/- (Six Thousand Six Hundred Only)

I have enclosed the Boucher for reference.

Thanking you,

Yours Sincerely,

*Handwritten signature of Dr. S.S. Sudha*  
11/2/2017

*Handwritten note:*  
6/2/17  
forwarded to STJ  
6/2/17





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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Dr. N.G.P. ARTS AND SCIENCE COLLEGE		Kalapatti Road, Coimbatore - 641 048.	
Voucher No: 1612	<b>PAYMENT VOUCHER</b>	Date: 2.2.17	
Paid to	S.S. Sudha		
Particulars	Towards Registration fees for ST. Joseph's College on 16th Feb - 17, Karnataka		
Amount	Rupees Six thousand Six hundred only		
Bank	Cash / Cheque No. 254683		
Account Head	S.S. Sudha Advance		
Rs	6600/-	Received the above amount by Cash / Cheque	
Prepared by	Entered by	Passed by	Approved by
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>





## Dr. N.G.P. ARTS AND SCIENCE COLLEGE

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Web: www.drngpsc.ac.in | Email: info@drngpsc.ac.in | Phone: +91-422-2369100

NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

Coimbatore,  
08-09-2016.

From,

N. Kumar,  
Coordinator,  
Center for Value Education,  
Dr.NGP Arts and Science College,  
Coimbatore.

To

The Madam Secretary,  
Dr.NGP Arts and Science College,  
Coimbatore.

Through,

The Principal,  
Dr.NGP Arts and Science College,  
Coimbatore.

Respected Madam,

Sub. : Requesting permission for attending Workshop at Gobi Arts and Science College – Reg.


Following faculty members of CVE are selected to attend the "Two Day NAAC Sponsored workshop on Value Education: Issues and Challenges" between 16-09-2016 and 17-09-2016 at Gobi Arts and Science College at Gobichettipalayalam.

1. Mr. K. G. Nandhakumar, Dept. of Computer Science.
2. Mr. N. Krishnaraj, Dept. of Tamil.

In this regard, I request you to kindly permit us to attend the workshop by sanctioning an amount Rs.400/- (Four Hundred Only) towards registration fee.

Thanking you,

Yours truly,

  
N.Kumar

Coordinator – CVE

  
08/09/16








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NAAC  
3<sup>rd</sup> Cycle

Criterion VI  
Metric 6.3.2

 **Dr. N.G.P. ARTS AND SCIENCE COLLEGE**  
Kalapatti Road, Coimbatore - 641 048.

Voucher No: 440 **PAYMENT VOUCHER** Date: 20/09/16  
20/09/16  
 Paid to: M. Kumar  
 Particulars: Rs amount paid for attending value education  
on 16/09/16 & 17/09/16 at Gelnchitpalayam.  
 Amount: Rupees Four Hundred Only  
 Bank: Cash / Cheque No. Petty cash  
 Account Head: Conference & Seminars Expenses  
 Rs 400/- *Received the above amount by Cash / Cheque*  
 Prepared by: [Signature] Entered by: [Signature] Passed by: [Signature] Approved by: [Signature] Signature: [Signature]

