

Indian Institute of Technology Kanpur Centre for Continuing Education

ADVANCE FOR SHORT TERM COURSE UNDER CCE

1.	Course Account No.: IITK/CCE/		
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:			
Amo	Office Use Only ount Already Drawn: nce Amount: ance Amount:	Signature of Course Coordinator(s)	
A	ccountant Superintendent		
Date:	/ / Approved / Not Approved / Head, CCE	ved	
110ad, CCD			