

PROFORMA FOR B.ED MENTOR BILL CLAIM

Annexure-B

SC/PSC CODE:

SC/PSC ADDRESS:

Name & Address of the Mentor.....

(Contact No.) (Land Line).....Mobile:)

SN	Name of Learner	Enrolment No.	Date of visit	Sr. No. of Lesson plans monitored

Total Amount claimed:

No. of Lesson Plans monitored X Rs. 40/-

_____ X Rs. 40/- =Rs. _____

Total claim

Signature of Claimant
(mentor)

Certified by Coordinator / PIC

- N.B
1. TAB Sheet in respect of all the Learners must be retained at the SC/PSC.
 2. Eligibility of Mentor should be a teacher with B.Ed.