

Dr. Mahalingam College of Engineering and Technology - Pollachi-03.
 (An Autonomous Institution)
 Office of Dean Research and Innovation

Consultancy FORM 7

Consultancy Work Incentive (Revenue Sharing) – Claim Form and Checklist
(Please use only ONE form per Work even if faculty members are from different departments)

Details of Consultancy Work and Revenue Sharing:

Claim for the Academic Year	JUNE _____ to MAY _____
Consultancy Work Title:	
Client / Funding Agency Details:	
Location:	<i>Internal / External</i> Details If, External:
Purchase Order No./Reference letter from the agency/client with date: <i>(Please give No. & Date of the purchase order for the amount and period (phase by phase))</i>	
MCET Invoice No. with date: <i>(Please give No. & Date of the invoice for the amount and period (phase by phase))</i>	
Duration of the work: <i>(Please mention the start month/date and month/end date)</i>	
Completion status: <i>(Incentive can be claimed only after 100% of completion of the work and 100% of the revenue generated).</i>	<i>Yes/No</i>
Whether Closing report Received from the agency?	<i>Yes/No (Pl. enclose a copy)</i>

Amount mentioned in the invoice (Rs.):	
Total Amount received from the agency/client (A) (Rs): <i>(Mention both in words and figure)</i>	
Total amount spent for the consultancy (B) (Rs): <i>(Mention both in words and figure)</i>	
Net Total Revenue Generated from the consultancy (C=A-B) (Rs): <i>(Mention both in words and figure)</i>	
Usage of Institution Resources: <ul style="list-style-type: none"> <i>If Institution resources are utilized - 60:40 ratio 60% to the institution and 40% as an incentive otherwise 40:60</i> 	Yes/No
Eligible Generated Revenue to be shared (D)(Rs): <i>(Mention both in words and figure)</i> D= 0.6*C <i>(if institution resources are not utilized)</i> D= 0.4*C <i>(if institution resources are utilized)</i>	
Department's Faculty Team share of the incentive (E=0.75*D) (Rs): <i>(Mention both in words and figure)</i>	
Department's Supporting Staff Team's share of the incentive (F=0.15*D) (Rs): <i>(Mention both in words and figure)</i>	

Check-List & Recommendation

(Please provide Hard and Soft Copy of the below-mentioned details)

- | | |
|---|--|
| <input type="checkbox"/> Purchase order from the agency/client. | <input type="checkbox"/> Details of the amount spent |
| <input type="checkbox"/> Proof of Financial Transactions | <input type="checkbox"/> Copy of the final report |
| <input type="checkbox"/> MCET Invoice
<i>(Completed)</i> | <input type="checkbox"/> Amount Sanction Order |

I/we assure you that the above-mentioned details are correct. I/we declare that the incentive for the above-mentioned consultancy work was not claimed previously and it will not be claimed in MCET in the future.

*I/we declare that the institution's resources are **(not)** utilized and I/we are sharing the Net revenue generated and among all the faculty and supporting staff involved as per the below mentioned table.*

Name (S) of the Faculty Team and Supporting Team		Designation & Department	Claim Amount	Signature with Date	Recommendations of HoD
Faculty Team (Max of E Rs.)	1.				Verified/Not Verified _____ (Signature of HoD)
	2.				
	3.				
	4.				
Supporting Staff involved: <i>(if any)</i> (Max of F Rs.)	1.				Verified/Not Verified _____ (Signature of HoD)
	2.				

For office Use Only

The above mentioned financial details regarding this consultancy works are verified as per the office records and found correct.

As our office records the following details are provided

Title of the work: _____

Agency Name: _____

Department(s) involved: _____

The total revenue generated (in Rs.): _____ (in words)

Net revenue generated (in Rs.): _____ (in words)

Total Consultancy Share for faculty team (in Rs.): _____ (in words)

Total Consultancy Share for supporting team (in Rs.): _____ (in words)

Total Consultancy Share for MCET Office (in Rs.): _____ (in words)

Total Consultancy Share for Central Office (in Rs.): _____ (in words)

Signature of MCET Office Manager

Signature of Central Office Manager

Approvals

S.No	Revenue Sharing	Amount Claimed	Amount Sanctioned
1.	Faculty Team		
2.	Supporting Staff involved <i>(if any)</i>		
3.	MCET Office		
4.	Central Office		
Total Amount			

Signature of the Consultancy works R&I Coordinator

Signature of the Dean R & I

Signature of the Principal

Signature of the Secretary

NORMS FOR SHARING OF CONSULTANCY REVENUE

Net revenue received for consultancy	Institution resources are utilized	60:40 ratio 60% to the institution 40% as an incentive
	Institution resources are not utilized	40:60 ratio 40% to the institution 60% as an incentive
Norms for the distribution of Incentive		
Faculty team members handling the consultancy		75%
Department supporting staff involved in the consultancy work		15%
MCET Office		5%
Central Office		5%