

**Approval Form for Consultancy Work**

(To be sent to Head IRCDC along with original request from client)

**Date:**

- 1) Title of Consultancy work:**
- 2) Name of the Client:**
- 3) Type of consultancy work (define):**
- 4) Consultancy Team:**
- 5) Consultancy fee to be charged**
- 6) Probable dates of commencement and completion of the work:**
- 7) Name any other external consultant (if any with designation):**
- 8) Whether necessary facilities and expertise available:**
- 9) If interdepartmental, name of other departments / centers:**

**Consultant**

**Head of the Department**

Note: Detailed estimated budget may please be attached by consultant along with the proposal.