

To be submitted on letter head of TP

Invoice for 3rd Instalment

Invoice No.:

Date:

To, MISSION DIRECTOR, ASSAM SKILL DEVELOPMENT MISSION KATABARI, DPS ROAD, NH-37 GARCHUK, GUWAHATI ASSAM, PIN- 781 035	From, Training Partner : Training Centre Address:PIN..... Email Id : Contact No..... TP ID..... TC ID PAN No. GSTIN No.
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Sanction Order/ Allocation Advice No.....Date.....

Bank Name:	Sector:	Job role:
Account Number:	Bank Branch:	QP Code:
IFSC Code:	Approved Batch size:	Actual Batch Size:
Batch Id:	Actual Batch Commencement Date:	Total Training Duration (hrs):
Batch End Date:	Assessment Date:	

Sl. No.	Particulars	Reference/Calculation/Unit	Details
A	Total Candidates Passing assessment	In Nos. (as per invoice of 2 nd instalment)	
B	Total Candidates Placed out of A above	In Nos. (Total of Annexure-A & Annexure-B attached)	
C	Total hours of training	Total Training Duration (in Hours)	
D	Rate per hour	Per Candidate/hr (As per Sanction Order)	
E	Placement percentage	(B/A) x 100% (rounded off)	
F	Rate of 3 rd milestone (in percentage)	a) Greater than or equal to 80% = 20% b) Greater than or equal to 50%, but less than 80% = $\frac{20 \times E}{80}$ c) Less than 50% = Nil	%
G	3rd Instalment Amount	AxCxDxF	Rs. _____/-

Total Amount Receivable (Rupees)only

Signature of Authorised Signatory of the TP with Seal

Enclosures: (TP needs to attach the following)

1. **Annexure A:** Details of Candidates placed in Wage Employment countersigned by DPM-T along with proof as per Process & Cost Norms of ASDM
2. **Annexure B:** Details of Candidates in Self Employment countersigned by DPM-T along with proof as per Process & Cost Norms of ASDM

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Annexure-A: Details of Candidates placed in Wage Employment

Sl No	Unique ID (As per ASDM portal)	Name of the Candidate	Date of placement	Employer Name and Location	2 nd Employer Name and Location (in case of job change)	Last drawn Gross Remuneration per month	Joining Letter Submitted (Tick if submitted)		Salary Slip Submitted (Tick if submitted)			Bank Statement submitted (Tick if submitted)		
							1st	2nd	M 1	M 2	M 3	M 1	M 2	M3
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Note- **M** stands for Month

Signature of Centre In-charge of the Training Centre

Verified and countersigned by DPM-T

Signature of Authorised Signatory of the TP

Date

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Annexure-B: Details of Candidates in Self Employment

Sl No	Unique ID (As per ASDM portal)	Name of the Candidate	Date of commencement of self employment	Nature of self employment	Name and Location of self employment	Proof of self employment Attached* (Type)
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*Note-

1. The proof of business can be either Trade License (or Panchayat certificate if location is outside the municipal area) OR proof of becoming a member of producer group OR Earning proof in the form of Bank Statement OR Loan sanction letter
2. Attach Photograph AND relevant proof of business as above.

Signature of Centre In-charge of the Training Centre
Signature of Authorised Signatory of the TP

Verified and countersigned by DPM-T
Date