

Column 1	Column 2
	<div>Faculty/Admin: <input type="text" value="Input 1"/></div> <div>Department : <input type="text" value="Input 1"/></div> <div>Contact Person: <input type="text" value="Input 1"/> Telephone No: <input type="text" value="Input 2"/></div>
Row 2, Cell 1	Row 2, Cell 2
Row 3, Cell 1	<div>Funds GOSL    Yes <input type="text" value="Agair"/> Project: <input type="text"/> Vote: <input type="text" value="Vote"/></div> <div>Budget Allocation Rs.: <input type="text"/> Used Amount So far Rs.: <input type="text"/> Balance Available Rs: <input type="text"/></div> <div>If No should get the Vice Chancellor's Approval:    Approved: <input type="text"/> Vice Chancellor: <input type="text"/></div>
Row 4, Cell 1	Row 4, Cell 2
Row 5, Cell 1	Row 5, Cell 2
Row 6, Cell 1	Row 6, Cell 2
Row 7, Cell 1	Row 7, Cell 2
Row 8, Cell 1	Row 8, Cell 2
Row 9, Cell 1	Row 9, Cell 2
Row 10, Cell 1	Row 10, Cell 2
Row	

11,  
Cell 1

Row 11, Cell 2