PERIYAR UNIVERSITY, SALEM – 636 011, TAMILNADU

Ph.D THESIS EVALUATION FOREIGN EXAMINER

BANK ACCOUNT DETAILS

(The examiners are requested to send the filled claim form with following details for speedy payment of honorarium)

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Beneficiary Name | **:** |  |
| 2. | Beneficiary full address | : |  |
| 3. | Foreign A/C. Number |  |  |
| 4. | IBAN Number (if available) | : |  |
| 5. | SWIFT CODE | : |  |
| 6. | Bank name | : |  |
| 7. | Bank full address | : |  |

Signature of the Examiner with Seal