

Entrepreneurship Development Cell Student Enrollment Form

Doc No	EDC/01
Rev. No.	00
Date	31-10-2016

Name	:				
Reg. No.	:				
Program	:				
Branch	:				
Year	:				
Section	:				
Contact Mobile No.	:			Email ID	:
Any Family Business	:	☐ Yes	□ No		
Details of Family Business					
Your Opinion on Entrepreneurship	:				
Your Expectation from E-Cell	:				
Any other Relevant Information	:				



Entrepreneurship Development Cell Nomination form – Student E leaders

Doc No	EDC/02
Rev. No.	00
Date	31-10-2016

Name	:					
Reg. No.	:					
Program	:					
Branch	:					
Year	:					
Section	:					
Contact Mobile No.	:				Email ID	:
Interested to take part in	:	☐ Event & Program Management	☐ Finance and Accounting	☐ Media & marketing	☐ HR management & Hospitality	☐ Documentation
Reason for choice						
Your possible contribution	:					
Any other Relevant Information (like	:					



Entrepreneurship Development Cell Student E- leaders selection Intimation

Doc No	EDC/03
Rev. No.	00
Date	31-10-2016

Sir/Madam,

It is pleasure to inform you that you are selected as student E-leader for the academic year an
your responsibility will be on Event & Program Management/Finance & accounting/Promotion & marketing/ H
management/ Documentation. You are requested to report to the staff coordinator o
<u> </u>

We solicit your active participation in the forthcoming events.



Entrepreneurship Development Cell Event approval form

Doc No	EDC/04
Rev. No.	00
Date	31-10-2016

To					
	The Principal	- · ·			
	Thiagarajar College of I Madurai – 625015	Engineering,			
	Madurai – 625015				
Sir,					
,	Sub : Requesting approv	al to conduct	eve	ent for students on	reg
	On behalf of Entrepren	eurship Developme	ent Cell, we propos	e to organize	event for the
stude	nts of c	ollege(s) on	at	venue. The details of t	the event are listed below for
your l	kind consideration.				
	Name of the Ev	ent	:		
	Target Beneficia	aries	:		
	Expected No. of	f Participants	:		
	Duration of the	event	:		
	Time		:		
	Venue		:		
	Approximate By	udget for			
	Honorariu	m for Guest speake	ers		
	Event Pro	motion	:		
	Refreshme	ents	:		
	Prize distr	ibution	:		
	TOTAL		:		
	We request you to kind	ly sanction approva	l to conduct this ev	ent and also sanction appr	oval to meet the expenditure
from	hea	d of account.			
Signa	ture of Participant	EDC S	Staff Coordinator	Associat	te Dean



Entrepreneurship Development Cell Event Registration form

Doc No	EDC/05
Rev. No.	00
Date	31-10-2016

Name	:					
Reg. No.	:					
Program	:					
Branch	:					
Year	:					
Section	:					
Institution	:	□ TCE		□ External	Name of the Institution	:
Contact Mobile No.	:				Email ID	:
Organized by	:	□ТСЕ		☐ External agencies	Name of the External agency	:
Registration fees	:	□ N/A	□ Paid	□ Not Paid		
Mode of Payment & Details	:					



Entrepreneurship Development Cell Student Selection intimation for event

Doc No	EDC/06
Rev. No.	00
Date	31-10-2016

Sir/Madan	n.
-----------	----

It is pleasure to inform you that you are selected	d for the	event	to be held at
Thiagarajar College of Engineering on	by _	at	venue.
You are requested to kindly check the pre-requisites	to attend	this event from	(HR
Management Committee).			
For further queries kindly contact the EDC coordinate	or	E.mail:	tceedc16@gmail.com

Dean – III



Entrepreneurship Development Cell Event Venue Request Form

Doc No	EDC/07
Rev. No.	00
Date	31-10-2016

То	Estate Officer, TCE, Madurai	
Sir,		
	Sub : Requesting permission to conduct	event for students on reg.
		nt Cell, we propose to organize event for the on
	at venue. The details o	of the event are listed below for your kind consideration.
	Name of the Event	:
	Expected No. of Participants	:
	Duration of the event	:
	Time	:
	Venue	:
	We request you to kindly sanction permissi	ion to conduct this event in venue.



Entrepreneurship Development Cell Expenditure statement form

Doc No	EDC/08
Rev. No.	00
Date	31-10-2016

Expenditure Head Details of Expenditure		Amount Amount Sanctioned Spent	Amount Spent	Excess amount	Balance Amount	Remarks		
	S.No	Bill No. & Date	Company Name			remitted	reimbursed	
Event	1.							
Management	2.							
	3.							
Promotions and	1.							
Marketing	2.							
	3.							
Documentation	1.							
	2							
	3.							
Transportation	1.							
	2.							
	3.							
Miscellaneous	1.							
	2.							



Entrepreneurship Development Cell Monthly report on EDC activities

Doc No	EDC/09
Rev. No.	00
Date	31-10-2016

Month: Academic Year:

Name of the event conducted	No. of Participants	Name of the external resource person involved	Nature of Interaction	Follow- up action



Entrepreneurship Development Cell Approval for Guest Speakers/ Facilitators

Doc No	EDC/10
Rev. No.	00
Date	31-10-2016

To					
	_	ncipal ajar College of Engineering, i – 625015			
Sir,					
ŕ	Sub: Re	questing approval to invite	as Guest spe	eaker for	program – reg.
	On beh	alf of Entrepreneurship Deve	elopment Cell, we propose	to conduct <u>CEO</u>	Connect/ Entrepreneurship
<u>Aware</u>	eness Lec	ture/ Boot camp/ Entrepreneur	ship Development Program/	Ideation program/	Business plan contest for the
studen	its of	college(s) on	at ver	nue.	
	To cond	uct this program we would like	to invite following resource p	person	
		Name of the Resource person	Name of the organization	Experience	
	!				
	We requ	est you to kindly sanction appr	oval to invite the above dignit	taries for our event	and also sanction approval to
pay th	em sum	of Rs as hon	orarium.		



Entrepreneurship Development Cell Event Feedback form

Doc No	EDC/11
Rev. No.	00
Date	31-10-2016

Thank you for attending the event. `request you to fill in the form below:	Your feedback and suggestions will help us to improve the program. We
Your feedback: 1. Your overall experience about the Event:	
2. Which were the most useful parts of the event/ l	
3. How could we improve the event/Program?	
4. Overall Rating for the event: Please tick or circl	le one of the following options:
1. Poor 2. Bad 3. Average	4. Good 5. Excellent
Please provide the following details:	
Name:	
Institute:	
E-Mail Id:	
Contact Number:	<u>_</u>
We thank you for your cooperation and look forwa	

Participant Signature



Entrepreneurship Development Cell Student On-duty leave Request form

Doc No	EDC/12
Rev. No.	00
Date	31-10-2016

To							
	The Principal						
	Thiagarajar College of Engineering,						
	Madurai – 625015						
Sir,							
	Sub : Requesting On duty leave to the students who have attended event– reg.						
	On behalf of EDC, we have conducted event on from to In this						
regard, following students organized/attended the meeting. Hence we request you to kindly provide On-duty leave to the							
follow	ving students from to						

Name of the	Reg. No.	Department	Program & Year	On duty period
student				

EDC coordinator Associate Dean Dean IIII



Entrepreneurship Development Cell Event Management – Check List

Doc No	EDC/13	
Rev. No.	00	
Date	31-10-2016	

DATE:

NAME OF THE EVENT:

Event Management	t	Promotion & Marketing	HR Management &	Accounting and Finance	
Committee		committee	Hospitality committee	Committee	
Venue arrangement		Invitation to □ Deans/HoDs/Department coordinators	Transportation arrangement of guest speakers	Advance requisition from the institution	
Photos/Video arrangement		Intimation to students □ through Whatsapp/ social media	Boarding and lodging of guest speakers & participants	Collecting Registration fees from the participants	
LCD projector/Mic arrangement		Uploading of photos in □ social media	Gathering interested student participants in the venue	Maintaining accounts ☐ for every expenditure	
Reception arrangement			Preparing direction map for the venue		
Honorarium/Memento □ to guest speakers			Providing necessary materials for workshop		
Program agenda			Collecting attendance of the participants		
Master of ceremony			Refreshments to guest and participants		
Feedback from Participants					
Student Coordinator Signature		Student Coordinator Signature	Student Coordinator Signature	Student Coordinator Signature	

EDC coordinator Associate Dean Dean IIII

EDC coordinator Associate Dean IIII