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| **RESIGNATION FORM** | **Form PS- 10** |

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| 1. | Name of the Project Staff | : |  |
| 2. | Project Staff Number | : |  |
| 3. | Mobile Number and Email | : |  |  |  |  |  |  |  |  |  |  |
|  |
| 4. | Designation | : |  |
| 5. | Department | : |  |
| 6. | Project Sanction Letter No/ Project No | : |  |
| 7. | Reason for resignation | : |  |
| 8. | Date and session of Joining | : |  FN ☐ / AN ☐ |
| 9. | Proposed date of Relieving  | : |   |

Note: It is mandatory to give one months’ notice. However, on the recommendation of PI/CI, the notice period is relaxable with approval from Dean (R&D)

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| Signature of Candidate with date |
| Date of Relieving:  |
| Comments and Recommendation of PI/CI: |
| Resignation may be Accepted / not be Accepted |
| Name of PI/CI: Signature of PI/CI with date |
| Signature of HoD with Date |

**FOR OFFICE USE**

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| **Recommendation:** | **Approval:** |
| **Assoc. Dean (R&D)** | **Dean (R&D)** |