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| **NO DUES FORM** | **Form PS- 11** |

|  |  |  |  |
| --- | --- | --- | --- |
| 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. | Date of Joining | : |  FN ☐ / AN ☐ |
| 8. | Date of Relieving  | : |  FN ☐ / AN ☐  |
| Signature of Candidate with date |
| **Name of Department/Section** | **Remarks** | **Signature of Head/Section I/c** |
| Computer Centre |  |  |
| IT and Help Desk |  |  |
| Library |  |  |
| Hostel |  |  |
| Supervisor@  |  |  |
| Head of Department |  |  |
| IIPE Office |  |  |
| @ Supervisor is requested to ensure that entire project related material (including data, devices etc.) is submitted before accepting the resignation |
| Remarks of Finance & Accounts:  |

|  |
| --- |
| **Reliving Letter, No:** |
|  **Signature of Office Staff****Copy to:** Project Staff **Date:** |