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POORNIMA GROUP

Achieving Excellence Together

E9

NO DUES FORM

Issued on:-

Proposed Date of Relieving:-

Registrar

The Registrar
PCE/PIET/PGI, Jaipur

Dated:

Employee ID: _____

Department : _____

Subject: Submission of Resignation from services/ Inter Institute Transfer

Sir/Mam,

I, hereby tender my resignation/Transfer from service on account of
[Please mention reason] w.e.f. [Mention date]. It is also informed that my date of joining at Poornima was
You may consider my resignation as one month notice/request for relieving me immediately [Please strike off, which is not applicable]
Name..... Designation..... Mobile No.....
Residential Address..... E-mail@poornima.org

Signature of Applicant

Intimation of resignation given well in time Yes/No																	Registrar																		
S. No.	Authority	Issues / Department														Dues [Write amount / Material] / No Dues				Name & Signature															
1.	Administrative Department	a) Mobile/SIM [Registrar]																																	
		b) I. Card [Registrar]																																	
		c) Store Department [Mr. Hariom Jangir]																																	
		d) Provision store [Mr. Hariom Jangir]																																	
		e) Dress [Mr. Hariom Jangir]																																	
		f) Transport office [Mr. B. P. Yadav]																																	
		g) Hostel [Warden G/B]																																	
		h) Library [Librarian]																																	
		i) Mess/Canteen [Mr. Praveen Singhvi]																																	
		j) Laptop/Computer accessories [Network Administrator]																																	
		k) E mail address closed [Network Administrator]																																	
		l) Secrecy & Exam. cell (Answer books/Midterm Question paper / student attendance submission & clearance)																																	
																		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	WD	L	A
		l) Attendance status of month of.....														16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
2.	HOD	A. Department Library																																	
		B. Deptt. Labs / Studio																																	
		C. i) Charge handing over of Academic/other Documents with name of faculty/person to whom handed over ii) Faculty Diary/Lecture notes/Files deposited to HOD Approved the proper handing over of various duties/charge																																	
3.	Dean	Approved the proper handing over of various duties/charge																																	



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4.	<p>Outcome of the Exit Interview:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <p style="text-align: right;">HOD</p>		
5.	<p>RECOMMENDED for relieving immediately / on (write date) <input type="checkbox"/> with one month salary deduction / <input type="checkbox"/> without one month salary deduction [Please tick]</p> <p style="text-align: right;">Campus Director</p>		
6.	<p style="text-align: center;">NO DUES / DUES CONFIRMATION FORM</p> <p style="text-align: right;">Dated: _____</p> <p>Mr./Ms. _____ Designation _____ of (Deptt.) has submitted application for resignation from services, w.e.f. _____. The same has been approved by the authorities. You are requested to issue No Dues / Dues Certificate for settlement of claims.</p> <p style="text-align: right;">Registrar</p>		
7.	<table border="1" data-bbox="164 1526 1523 1595"><tr><td data-bbox="164 1526 581 1595">ACCOUNTS OFFICER</td><td data-bbox="581 1526 1523 1595">To submit account sheet of final settlement considering above to HR Department</td></tr></table> <p data-bbox="164 1595 1523 1710">Claim settled & relieved and certificate of experience issued by Registrar Office YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p data-bbox="164 1710 1523 1921">Received certificate of experience & claim settled and closed</p> <p style="text-align: right;">Signature of Applicant</p>	ACCOUNTS OFFICER	To submit account sheet of final settlement considering above to HR Department
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