|  |  |
| --- | --- |
| A description... | **भारतीय विज्ञान शिक्षा एवं अनुसंधान संस्थान मोहाली**सैक्टर-81, नाँलेज सिटी, पो. ओ. मनौली, एस. ए .एस. नगर, मोहाली, पंजाब - 140 306**INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH MOHALI**Sector – 81, Knowledge City, P.O. Manauli, S.A.S. Nagar, Mohali, Punjab -140 306 |
|  **● Phone : +91-172-2240124● Fax : +91-172-2240124 ● http://www.iisermohali.ac.in** |

**NO DUES CERTIFICATE**

Date:……………………..

[

1. Name of the Employee:……………………………………………………………………….………………………………………….

2. ID Number:……………………...................... 3 Designation: ………………………….………..……………………….

4. Section/Division: ………………………………………………….…………………………………………………………………………

 5 Reasons for seeking NDC : ………………………………………….……………………………………………………………………

 6 Effective Date:……………………………………..

 7 Future Address: ……………………………………………………………………………………………………………………………..

 ……………………………………………………………………………………………………………………………….

(Signature of the Employee)

 8 No Objection for his/her relieving from the present position:…………………..…………………………………….

***(Head of the Department )***

**------------------------------------------------------------------------------------------------------------------------------------------**

**This is to certify that nothing is outstanding against the employee as named above:**

**Sr No.** **Section Name Authorized Signatory**

1. Stores and Purchase:

 (Assistant Registrar (S&P)

1. Library:

 (Library Incharge)

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1. Accounts Section:

 (Superintendent)

 d) Head of the Labs:

 Biology: ……………………………….. Chemistry: ..………………………… Physics: ………………………………

1. IWD/Estate Office:

 (Superintendent Engineer)

…………………………………………………………………………………………………………………………………………………………

1. Establishment Section :

 (Superintended /OA)

1. Guest House:

 (Guest House In-Charge)

1. Hostel:

 ( Warden )

Sh./Smt…………………………………………………, has handed over the charge of this position to Sh./Smt………………………………………………… with all record/documents complete in all respect.

(Dean Faculty)

***FOR ESTABLISHMENT SECTION***

Sh./Smt…………………………………………………………………………………………………, has submitted *NO DUES CERTIFICATE* from all concerned and nothing is outstanding in his/her name.

No Dues Certificate is placed below for signature.

**(Superintended /OA)**

***AR (Establishment) (Registrar) (Director)***

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