

**ICMR-RMRC GORAKHPUR, BRD
MEDICAL COLLEGE CAMPUS,UTTAR
PRADESH -273013**

No. A/P -

Dated:

ADMINISTRATION BRANCH

1. Dr./Shri/Smt./Ms. _____ Designation _____ (Employee ID _____) is retiring from service on attaining the age of superannuation/ voluntarily/ has been permitted to resign his/her post in this Secretariat/transferred to...../repatriated to his parent department/whose service has been terminated with effect from the forenoon/afternoon of the _____ vide office order/letter **A/P** - _____ □□□□□□□□_____.
2. In this regard. He/she may, therefore, please be relieved of his/her duties and all office property in his/her possession should be taken from him/her and a '**No Dues Certificate**' please be furnished to Administration Branch before the date of relieving on the form appended below: -

Name & Designation:.,**Admn. Officer**, Signature _____

NO DUES CERTIFICATE / □□□□ □□□□□□ □□□□

Certificate that-

1. Dr./Shri/Smt./Ms. _____ has surrendered all office property (**Please mention details on reverse**) in his/her possession and there is now nothing outstanding against him/her in so far as this Branch is concerned.
Head of Stores/Section Officer(Stores): Name & Designation _____ Signature _____
2. Dr./Shri/Smt./Ms. _____ has surrendered all computers/accessories issued to him/her. His official e-mail ID has also been deactivated and transferred all e-files/e account to
In-Charge (IT/e-Gov Cell): Name & Designation _____ Signature _____
3. Dr./Shri/Smt./Ms. _____ has surrendered CGHS Card, Vehicle Sticker etc and there is now nothing outstanding against him/her.
Section Officer (Administration): Name & Designation _____ Signature _____
4. Dr./Shri/Smt./Ms. _____ has surrendered Identity Card and there is now nothing outstanding against him/her.
In-charge (Publication/I. Card Section): Name & Designation _____ Signature _____
5. Dr./Shri/Smt./Ms. _____ has surrendered all books etc. issued to him/her by Library and there is nothing outstanding against him/her.
ALIO: Name & Designation _____ Signature _____
6. Account of Dr./Shri/Smt./Ms. _____ has been checked and no Government dues are to be recovered from him/her. OR Amount of Rs. _____ is due from Dr./Shri/Smt./Ms. _____ on account of advance/over payment and this amount will be adjusted at the time of making final payment to him/her.
Accounts Officer : Name & Designation _____ Signature _____
7. Dr./Shri/Smt./Ms. _____ has not available of any leave which is pending for inclusion in the Office Order/ leave Account /E-leave Account.
Concerned Reporting Officer/ In charge F.U.: Name & Designation _____ Signature _____
8. No vigilance/disciplinary/judicial proceedings are pending or being contemplated against Dr./Shri/Smt./Ms. _____
Vigilance Officer: Name & Designation _____ Signature _____
9. I, _____ have submitted/written all APARs/Confidential Report(s) in the capacity of officer reported upon/Reporting Officer /Reviewing Officer as forwarded to him/her (applicable for concerned supervisory officer's, & OIC, F.U).
Name & Designation _____ Signature _____
10. Dr./Shri/Smt./Ms. _____ has surrendered all instruments (CIF) in his/her possession and there is now nothing outstanding against him/her in so far as this division is concerned.
Name & Designation _____ Signature _____

Charge Handed over to Dr./Shri/Smt./Ms. and Handing/Taking over is completed on..... (Please enclosed charge handing/taking over proforma).

DDO's SignatureAdministrative Officer..... Director

S.O. (Administration): Please keep in personal file