

NAME																						
Mob No.				Ema	ail ID																	
SCHOOL						DEP	Т.															
POSITION	PDF Project Asst./ Project Associate							ny ther														
PROJECT DURATION	From Date	0	l d	m	m	У	У	У	У	To Da		d	d	m	m	У	У	У	У			
DATE OF JOINING	d	d	m	m	У	/	У	У	Fello Sala	onth	IN	R										
Are you paid HRA?	Yes No If								es, wh	at is	the	HRA	? IN	INR								
Faculty /PI attached To																						
SCHOOL			DEP	T.																		
Mob. No. of PI								il ID I														
Room Deposit Paid	INR						Mes Adva Paid	ance	INR	INR												
Challan No.								lan														
Undertaking by Faculty/ PI: I hereby agree to clear all dues, if this PDF/ PA working with me does not clear them before leaving the hostel.										Signature & Stamp of PI with date												
Undertaking by PDF/PA: I hereby agree to adhere to all the norms and conditions put in place by the CWO. I will pay all my dues in time & agree to pay for any damages in my room. I shall not entertain guests under any circumstances.									Signature of PDF/ PA with date Hostel & Room No. Allotted:													
Signature of the Chief Warden with Date & Stamp										ure !	<b>የ.</b> ና+	amn -	of Ho	د اماء	Nard	en wi	th Da	ate				