

## **Staff No Dues Form**

Employee ID:	Full Name:	
Designation: Department: Date of Resignation/Retirement: Last Working Day: Contact Number: Email ID:  rance from Departments (Each department must provance before the final approval)  Library Clearance  Books Returned: [] Yes [] No  Librarian Signature: Accounts Department  Pending Dues: [] Yes [] No	Employee ID:	
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<ul> <li>Exit Interview Completed: [ ] Yes [ ] No</li> </ul>	Library Clearance	ned: [] Yes [] No nature: ent :: [] Yes [] No icer Signature:
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<ul> <li>Admin</li> </ul>	Department
。 <b>C</b>	Office Assets Returned: [ ] Yes [ ] No
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respective d TC Busines	I confirm that I have cleared all my dues with the epartments and have returned all assets belonging to s School. I understand that failure to do so may result ng my final settlement.
Signature:	
Date:/	
For Office U	Jse Only
• Final A	Approval By:
• Date:	//
<ul> <li>No Du</li> </ul>	es Certificate Issued: [] Yes [] No