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NATIONAL INSTITUTE OF TECHNOLOGY, UTTARAKHAND

Ref. No. _____

Date: _____

CHARGE HANDING OVER/TAKING OVER FORM (Teaching)

Purpose: All employees are required to fill the below form during their LONG PLANNED LEAVE / IN CASE OF RESIGNATION / CHANGE OF ADMINISTRATIVE RESPONSIBILITY to ensure the smooth functioning of action in departments/Sections during their absence from duty or at the time of relieving.

Authority: Office Order No.NITUK/ _____ date: _____

Name : _____ Name : _____

Employee Code : _____ Employee Code : _____

Designation : _____ Designation : _____

Section/Dept. : _____ Section/Dept. : _____
Details of Handing Over Person Details of Taking Over Person

A) Details of Responsibilities Handed Over
(Details of Important Tasks)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

B) Details of Important Matters Pending
(Correspondence, short note of the present status and future course of action)

1. _____
2. _____
3. _____
4. _____
4. _____
5. _____
6. _____

