IV.I Employee ID Card Requisition Form

FORM FOR REQUISITION FOR UNIVERSITY EMPLOYEE ID Card

Personal Details

Employee ID:		
Name:		
Designation:		
Reason for New ID Card:		
Address:		
Mobile:	Email ID:	
Date of Birth:	Date of Retirement:	
Gender:	Blood Group:	
Emergency Contact No.:	Aadhar No:	
Driving License No:	PAN:	
Was an ID card issued earlier?	□ YES	□ NO
If yes, has the existing card been returned?	□ YES	□ NO
Payment Details (if applicable):		

Declaration by Employee

I hereby declare that the information provided above is true to the best of my knowledge.

I further declare that:

- I do not hold more than one official ID card issued by the University.
- I shall return the ID card upon retirement, end of service, or at the time of renewal.
- I understand that misuse or duplication of the ID card may lead to disciplinary action.

Date: (Signature of the Employee)

Orders of the Registrar ☐ Sanctioned ☐ Not Sanctioned

Date: (Signature of the Registrar)