

The Registrar,  
Guru Nanak Dev University,  
Amritsar.

**Sub.:- Request for issue of 'No Objection Certificate' for procuring new or renewal of International Passport/Visa.**

Dear Sir,

I hereby apply for the issue of '**No Objection Certificate**' for procuring International Passport/renewal of Passport/acquiring visa for visiting foreign countries:

- 1) It is certified that I am not involved in any civil or criminal case pending in the court of law or any departmental enquiry at the University level.
- 2) Nothing is due standing against me if any is found the same may be recovered from my GPF/CPF.
- 3) It is certified that I am not getting this Visa for immigration to a foreign country.

Yours faithfully,

**Signature of the applicant**

**Name of the Applicant**\_\_\_\_\_

**Designation**\_\_\_\_\_

**Father's Name**\_\_\_\_\_

**Address**\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Recommendations of the Head  
of the Department/Branch**



**ਗੁਰੂ ਨਾਨਕ ਦੇਵ ਯੂਨੀਵਰਸਿਟੀ, ਅੰਮ੍ਰਿਤਸਰ**  
**GURU NANAK DEV UNIVERSITY, AMRITSAR**  
(Established by the State Legislature Act No. 21 of 1969 and  
University with Potential for Excellence recognized by UGC)

No. \_\_\_\_\_/Estt.

Date \_\_\_\_\_

**(To be given in Duplicate on Original Stationery)**

Certified that Shri/Shrimati \_\_\_\_\_ Son/W/o Shri  
\_\_\_\_\_ of is a temporary/permanent employee of this (office  
address) \_\_\_\_\_ from \_\_\_\_\_ (date) and is at present  
holding the post of \_\_\_\_\_. Shri/Smt. /Miss/ Mst

\_\_\_\_\_ is/are dependent family member(s) of Sh./Smt. \_\_\_\_\_ and  
and his/her identity is certified. This Ministry/Department /Organization has no objection to  
his/her acquiring Indian Passport. This undersigned is duly authorized to sign this  
**"Identity Certificate"**. I have read the provisions of Section 6(2) of the Passports Act,  
1967 and certify that these are not attracted in case of this applicant. I recommend issue of  
an Indian Passport to him/her. It is certified that this organization is a Central/State  
Government/ Public Sector Undertaking/Statutory body. The Identity Card No. of  
Shri/Smt. \_\_\_\_\_ is \_\_\_\_\_.

**Deputy Registrar (Estt.)**



## **ANNEXURE 'I'**

### **AFFIDAVIT**

**(To be executed on appropriate non-judicial stamp paper and attested by a notary public)  
(One original and one self-attested photocopy)**

I (name) \_\_\_\_\_ Son of \_\_\_\_\_ residing  
at \_\_\_\_\_ Date of Birth \_\_\_\_\_

being an applicant for issue of passport, do hereby solemnly affirm and state as follows:

1. That the names of my parents and spouse are as follows:
  - (i) Father :
  - (ii) Mother :
  - (iii) Wife/Husband :
2. That the names of my dependent children are as under:
  - (i) Daughter :
  - (ii) Son :
3. That I am continuously resident at the above mentioned address from \_\_\_\_\_.
4. That I am citizen of India by birth/descent/registration/naturalization and that I have neither acquired the citizenship of another country nor have surrendered or been terminated/deprived of my citizenship of India.
5. That I have not, at any time during the period of five years immediately preceding the date of this affidavit, been convicted by any court in India for any offence involving moral turpitude and sentenced in respect thereof to imprisonment for not less than two years;
6. That no proceedings in respect of any criminal offence alleged to have been committed by me are pending before any criminal court in India.;
7. That no warrant or summons for my appearance, and no warrant for my arrest, has been issued by a court under any law for the time being in force, and that my departure from India has not been prohibited by order of any such court;
8. That I have never been repatriated from abroad back to India at the expense of Government of India/I was repatriated from abroad back to India at the expense of Government of India, but reimbursed expenditure incurred in connection with such repatriation.
9. That I will not engage outside India in activities prejudicial to the sovereignty and integrity of India.
10. That my departure from India will not be detrimental to the security of India.
11. That my presence outside India will not be prejudice the friendly relations of India with any foreign country.

**Place:**

**Date:**

**DEPONENT**

### **VERIFICATION**

verified on \_\_\_\_\_ (date) at \_\_\_\_\_ (place) that the contents of the above mentioned affidavit are true and correct and nothing material has been concealed.

**DEPONENT**

**ANNEXURE -'A'**

**APPLICATION FOR AVAILING OF LEAVE TRAVEL CONCESSION**

1. Name of the Officer/Employee : \_\_\_\_\_
2. Post Held : \_\_\_\_\_
3. Date of Appointment : \_\_\_\_\_
4. Period during which LTC is proposed to be availed of (in case of self please indicate whether leave has been sanctioned) : \_\_\_\_\_
5. Block of years for which LTC is proposed to be availed of: : \_\_\_\_\_
6. Details of LTC to be availed of: : \_\_\_\_\_
  - i) Whether for visiting home town?
  - ii) Whether for visiting anyh place in India?
  - iii) In case of (ii)above the place to be visited.
7. Members of the Family for whom LTC is to be availed of : \_\_\_\_\_
  - (i) Name of a
  - (ii) family members with present age.
  - (iii) Relationship with the applicant.
8. When LTC was availed of last ? : \_\_\_\_\_

(indicate the block years for which LTC availed of and the period during which it was availed of )

  - (ii) If any, sanction for the grant of LTC was issued, please quote its number and date.

It is certified that the above Travel Concession for the Block Years being claimed above was not availed of previously.

It is further certified that the members of the family for whom LTC is being claimed are residing with me.

**SIGNATURE OF THE APPLICANT**

**DESIGNATION :** \_\_\_\_\_

**BRANCH/DEPTT.** \_\_\_\_\_

**Date :** \_\_\_\_\_

**Place :** \_\_\_\_\_

**Recommendation of H.O.D./Branch**

## ਗੁਰੂ ਨਾਨਕ ਦੇਵ ਯੂਨੀਵਰਸਿਟੀ, ਅਮ੍ਰਿਤਸਰ

ਛੁੱਟੀ ਲਈ ਬਿਨੈ-ਪੱਤਰ (ਕਮਾਈ ਛੁੱਟੀ/ਮੈਡੀਕਲ ਛੁੱਟੀ/ ਬਿਨ੍ਹਾਂ ਤਨਖਾਹ ਛੁੱਟੀ/ ਡਿਊਟੀ ਲੀਵ)

ਨੋਟ :- ਛੁੱਟੀ ਵਾਸਤੇ ਬਿਨੈ-ਪੱਤਰ( ਸਿਵਾਏ ਮੈਡੀਕਲ ਛੁੱਟੀ) ਘੱਟੋ ਘੱਟ 7 ਦਿਨ ਪਹਿਲਾਂ ਭੇਜਿਆ ਜਾਵੇ।

### (I) ਬਿਨੈਕਾਰ ਦੁਆਰਾ ਭਰੇ ਜਾਣ

1. ਬਿਨੈਕਾਰ ਦਾ ਨਾ \_\_\_\_\_
2. ਅਹੁਦਾ \_\_\_\_\_
3. ਵਿਭਾਗ/ ਸ਼ਾਖਾ \_\_\_\_\_
4. ਮੰਗੀ ਗਈ ਛੁੱਟੀ ਦੀ ਕਿਸਮ \_\_\_\_\_
5. ਮੰਗੀ ਗਈ ਛੁੱਟੀ ਦਾ ਸਮਾਂ ਜਿਸ ਮਿਤੀ  
ਤੋਂ ਜਿਸ ਮਿਤੀ ਤਕ ਛੁੱਟੀ ਚਾਹੀਦੀ ਹੈ। \_\_\_\_\_
6. ਸ਼ਨੀਵਾਰ, ਐਤਵਾਰ ਅਤੇ ਹੋਰ ਰਜਿਸਟਰਡ ਛੁੱਟੀਆਂ,  
ਜੇਕਰ ਕੋਈ ਪਹਿਲਾਂ ਜਾਂ ਪਿਛੋਂ ਨਾਲ ਲਗਾਉਣ  
ਲਈ ਤਜਵੀਜ਼ ਕੀਤੀਆਂ ਗਈਆਂ ਹੋਣ \_\_\_\_\_
7. ਛੁੱਟੀ ਲੈਣ ਦਾ ਕਾਰਣ, ਜਿਸ ਆਧਾਰ ਤੇ  
ਬਿਨੈ-ਪੱਤਰ ਦਿਤਾ ਹੈ। \_\_\_\_\_
8. ਛੁੱਟੀ ਦੌਰਾਨ ਕਲਾਸਾਂ ਲੈਣ ਦਾ ਪ੍ਰਬੰਧ  
(ਅਧਿਆਪਕਾਂ ਦੇ ਕੇਸ ਵਿਚ) \_\_\_\_\_  
ਛੁੱਟੀ ਦੌਰਾਨ ਪੱਤਰ-ਵਿਹਾਰ ਲਈ ਪਤਾ \_\_\_\_\_
9. ਟੈਲੀਫੋਨ ਨੰਬਰ \_\_\_\_\_

ਮਿਤੀ \_\_\_\_\_

ਬਿਨੈਕਾਰ ਦੇ ਦਸਤਖਤ

### (II) ਵਿਭਾਗ/ਸ਼ਾਖਾ ਦੇ ਮੁਖੀ ਦੁਆਰਾ ਭਰੇ ਜਾਣ

1. ਛੁੱਟੀ ਦੀ ਸਪੱਸ਼ਟ ਸਿਫਾਰਸ਼ (ਕਿਰਪਾ ਕਰਕੇ ਸਪਸ਼ਟ  
ਵਰਨਣ ਕੀਤਾ ਜਾਵੇ ਕਿ ਸਿਫਾਰਸ਼ ਕੀਤੀ ਜਾਂਦੀ ਹੈ  
ਜਾਂ ਸਿਫਾਰਸ਼ ਨਹੀਂ ਕੀਤੀ ਜਾਂਦੀ ਹੈ) \_\_\_\_\_
2. ਜੇਕਰ ਛੁੱਟੀ ਦੀ ਸਿਫਾਰਸ਼ ਨਹੀਂ ਕੀਤੀ ਜਾਂਦੀ ਤਾਂ  
ਕਾਰਣ \_\_\_\_\_
3. ਛੁੱਟੀ ਦੌਰਾਨ ਬਿਨੈਕਾਰ ਦਾ ਕੰਮ, ਵਿਭਾਗ/ਸ਼ਾਖਾ  
ਵਿਖੇ ਅੰਦਰੂਨੀ ਐਡਜਸਟਮੈਂਟ ਦੁਆਰਾ ਕੀਤਾ ਜਾਵੇਗਾ \_\_\_\_\_
4. ਅਧਿਆਪਕਾਂ ਦੀ ਛੁੱਟੀ ਦੇ ਕੇਸਾਂ ਵਿਚ ਕਿਰਪਾ ਕਰਕੇ  
ਉਸ ਅਧਿਆਪਕ ਦਾ ਨਾਂ ਅਤੇ ਅਹੁਦਾ ਸਪੱਸ਼ਟ ਕੀਤਾ  
ਜਾਵੇ ਹੋ ਅਧਿਆਪਕ ਦੇ ਰੁਟੀਨ ਦਾ ਕੰਮ ਦੇਖੇਗਾ ਜਾਂ  
ਛੁੱਟੀ ਦੌਰਾਨ ਬਿਨੈਕਾਰ ਦੀਆਂ ਕਲਾਸਾਂ ਲਵੇਗਾ। \_\_\_\_\_

ਮਿਤੀ \_\_\_\_\_

ਮੁਖੀ ਵਿਭਾਗ/ਸ਼ਾਖਾ ਦੇ ਮੋਹਰ ਸਮੇਤ ਦਸਤਖਤ

## **GURU NANAK DEV UNIVERSITY**

### **FORM OF DECLARATION**

**(To be filled in Duplicate)**

I hereby declare that I wish, in the event of my death, the amount at my credit in the University Provident Fund/General Provident Fund/Gratuity/Leave Encashment or any other amount payable to me on my death be distributed amongst the person(s) mentioned below in the manner shown against their name.

	<b>Name and address of the nominee or nominees</b>	<b>Relationship with the subscriber</b>	<b>Whether Minor or Major, if minor state the age/date of birth</b>	<b>Amount of share of deposit</b>
	<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>
1.				
2.				
3.				
4.				
5.				

Station \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_

(Signature of Employee)

Name of Employee \_\_\_\_\_

Father's Name \_\_\_\_\_

Designation \_\_\_\_\_

Signed in the presence of:

1. \_\_\_\_\_ (Signature)

Full name in block letters \_\_\_\_\_

Designation \_\_\_\_\_

2. \_\_\_\_\_ (Signature)

Full name in block letters \_\_\_\_\_

Designation \_\_\_\_\_

**Forwarded**

**Head of the Deptt. Branch**

## **FORM OF APPLICATION**

**(Family Pension Scheme of Punjab Govt. Employees, 1964)**

Application for a family pension for the family of late  
Sh./Smt. \_\_\_\_\_ Designation \_\_\_\_\_ in the  
office/department of \_\_\_\_\_.

1. Name of the applicant :
2. Relationship to the deceased :
3. Date of retirement, if the deceased was a pensioner. :
4. Date of death of Govt. employee/pensioner :
5. Name and ages of surviving kindered of the deceased :

**Name**

**Date of birth**

- |           |   |  |
|-----------|---|--|
| Sons      | : |  |
| Unmarried | : |  |
| Daughters | : |  |
6. Name of treasury/sub treasury PSB Branch at which payment is desired :
  7. Signature or left hand thumb impression :
  8. Descriptive roll of \_\_\_\_\_ widow/widower/  
guardian of the minor children of late \_\_\_\_\_.
    - i) Date of birth :
    - ii) Height :
    - iii) Personal marks, if any on hand or face. :
    - iv) Left hand thumb and finger impression :

Small finger

Ring finger

Middle finger

Index finger

Thumb

**Attested by**

1. \_\_\_\_\_
2. \_\_\_\_\_

**Witness:-**

1. \_\_\_\_\_
2. \_\_\_\_\_

## PERFORMA

The Vice-Chancellor,  
Guru Nanak Dev University,  
Amritsar.

Through:- **The Dean, Academic Affairs.**

**Sub:- Re-employment on contract basis after retirement for two years.**

Sir,

In accordance with the decision of the Syndicate taken in its meeting held on 11-10-2004 vide Para 15 and the modalities regarding re-employment, approved by the Vice-Chancellor, I offer my service for re-employment for two years w.e.f. \_\_\_\_\_.

Yours faithfully

Name:

Designation:

Department:

Dated : \_\_\_\_\_

### **Recommendation of the Dean, Affairs.**

The service of the above teacher are in the academic interest of the University.

Submitted for approval, please.

Dean, Academic Affairs

Vice-Chancellor



**GURU NANAK DEV UNIVERSITY**  
**AMRITSAR**

Affix attested recent  
photography of  
Applicant here

1. Name with surname, if any : \_\_\_\_\_  
(In block letters)
2. Father's name with surname, if any : \_\_\_\_\_
3. **Nationality**
  - Father : \_\_\_\_\_
  - Mother : \_\_\_\_\_
  - Husband : \_\_\_\_\_
  - Wife : \_\_\_\_\_
- Place of Birth**
  - Husband : \_\_\_\_\_
  - Wife : \_\_\_\_\_
4. Full Home Address : \_\_\_\_\_  
i.e. Village, Road, Street or : \_\_\_\_\_  
House No., Police Station & Distt. : \_\_\_\_\_
5. Permanent Address : \_\_\_\_\_  
: \_\_\_\_\_
6. Address/es where you resident during : \_\_\_\_\_  
the last five years : \_\_\_\_\_  
: \_\_\_\_\_
7. a) Date of Birth : \_\_\_\_\_  
b) Present Age : \_\_\_\_\_  
c) Age at the time of passing the Matric : \_\_\_\_\_  
Examination ( If Matriculate)
8. State place where you got your education from : \_\_\_\_\_  
the date you attained the age of fifteen and/or : \_\_\_\_\_  
state the name of college with year/s where you : \_\_\_\_\_  
got your education. : \_\_\_\_\_
9. State full address of the office/firm where the : \_\_\_\_\_  
applicant was previously employed. : \_\_\_\_\_
10. Give the names of the two responsible persons : \_\_\_\_\_  
of your locality or the name of two persons to : \_\_\_\_\_  
whom you are known. : \_\_\_\_\_
11. Address, Designation & Signatures with date of : \_\_\_\_\_  
the officer issuing this form. : \_\_\_\_\_
12. Have you ever been found guilty under any : \_\_\_\_\_  
offence by the court? If Yes, then under what : \_\_\_\_\_  
charge and the extent of punishment. : \_\_\_\_\_

**Signature of the Applicant**

I certify that the information stated by me in this form is correct to the best of my knowledge and belief. I have concealed nothing which may render me unfit from the University service.

**Signature of the Applicant**

Date : \_\_\_\_\_ (Signature with designation  
of the person verifying the antecedent form)  
Place : \_\_\_\_\_ (Name of the office in detail)