CLEARANCE FORM

Name				
Emp Code:		Future Correspondance Address		
Department:				
DoJ:				
DoR:		Contact Number:		
LWD:		Email Id:		
Signature:		Note (if any)		
Date:				
DoJ - Date of Joining; DoR - Date of Resignation; LWD - Last working day				
Sr. No.	**Particulars**	**Responsible Person**	**Dept./Location**	**Signatures**
1	Functional Handover	Reporting Manager Name_____	_	
Finance				
2	Advance/Investment Declaration Papers			
Information Technology				
3	Security & internet Access, Email ID; Computer, Printer			
Facilities				
4	ID Card			
5	Swipe Card			
Human Resources				
6	Cell phone connection de-activation			
7	submitted (if applicable)/PL Encashment/ Notice Pay Deducation/ Performance Bonus			
8	Exit Interview Feedback			

Remarks (if any):