

## Tezpur University

No.....

Date .....

### Sub : CHARGE HAND OVER/TAKE OVER REPORT

With approval of the competent authority, we the undersigned have handed over/taken over charge of the office of the ..... on .....

Relieved Officer/Teacher

Relieving Officer/Teacher

Signature .....

Signature .....

Full Name .....

Full Name .....

Designation .....

Designation .....

Date .....

Date .....

Copy to :

- 1) Dean of School concerned.
- 2) Head of Department concerned.
- 3) Registrar, TU.
- 4) Finance Officer, TU.
- 5) Secretary to the Vice-chancellor, TU.
- 6) Concerned Officer/Teacher.

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- N.B. : 1) The teacher/officer before proceeding on any leave (except casual leave)/training/Seminar/Workshop/LTC etc. will ascertain from the competent authority as to whom he/she would hand over charge and sign the report accordingly.
- 2) All official documents, files, office keys, etc. shall have to be handed over during hand over of his/her charges.