



अखिल भारतीय आयुर्वेद संस्थान

ALL INDIA INSTITUTE OF AYURVEDA (AIIA)

(आयुष मंत्रालय, भारत सरकार के अंतर्गत स्वायत्त संस्थान)

(An Autonomous Organization under the Ministry of AYUSH, Govt. of India)

JOINING REPORT

SUB: JOINING REPORT AFTER AVAILING EARNED LEAVE / COMMUTED LEAVE (MEDICAL) / DUTY LEAVE / ACADEMIC LEAVE / MATERNITY / PATERNITY LEAVE / VACATION

I, _____ Designation _____
_____ after availing summer/winter vacation / _____ days Earned Leave /
Commutated Leave (Medical) / HPL / EOL / Academic Leave / Vacation w.e.f. _____
_____ to _____ hereby report for duty in the F.N/A.N of _____. The
following dates, which were holidays/Sunday/Saturday may kindly be prefixed/suffixed:

Date: _____

Signature: _____

Name: _____

ID No.: _____

Dept.: _____

Designation: _____

Certificate by Controlling Officer

Certified that Dr./Mr./Ms. _____ joined in the
F.N/A.N of _____

Copy to:

- Establishment Section

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