



FORM OF APPLICATION

For obtaining 'NO OBJECTION CERTIFICATE (NOC)/EXPERIENCE Certificate'

(Through the HoD/Chairperson/Controlling Officer, Department/Centre/Branch/Section of _____ D.U.)

To

The Hon'ble Vice-Chancellor
Dibrugarh University

Sir,

I have the honour to request you to kindly issue a NO OBJECTION CERTIFICATE/EXPERIENCE Certificate as stated below:

1. Name of the applicant : _____
2. Designation : _____
3. Department/Centre : _____
4. Date of Joining : _____
5. Regular/Contractual : _____
6. Reason : _____

I hereby declare that the above mentioned facts & details furnished by me are true to the best of my knowledge and belief.

Date:

Place:

Signature of the applicant

RECOMMENDATION

The application of Dr./Sri/Smti _____ for No Objection Certificate/Experience Certificate is forwarded and recommended to the Vice-Chancellor, D.U. for consideration.

Date: _____ Signature : _____
Head/Chairperson/Controlling Officer : _____
Department/Centre/Section/Branch : _____
Seal : _____

OFFICIAL USE

The above mentioned request for issuance of NO OBJECTION CERTIFICATE/EXPERIENCE Certificate' is **granted/not-granted**.

Date:

VICE-CHANCELLOR

Registrar

As approved by the Vice Chancellor, a NOC/ Experience Certificate is prepared for your kind perusal and signature please.

Section Officer
Establishment Br. 'A'/'B'