



THE MAHARAJA SAYAJIRAO UNIVERSITY OF BARODA

Fatehgunj, Vadodara – 390 002, Gujarat, INDIA

Tel. Ph. : (+91-0265) • (Registrar) : 2795521 • (DO. / GCU) : 2793735 • (IA & CAO) : 2795506 • (Dy.R. Exam) : 2795502
• Academic : 2789485 • Audit : 2795050 • (Dy.R. ADE/ADM) : 2792032 • (ADE/ADM) : 2784062 • (Engineer) : 2795512

No.GCU/4/295

Date : 06 JUNE 2014

To
All the Deans of the Faculties (Except Medicine)
All the Principals of the Colleges
The M. S. University of Baroda
Vadodara

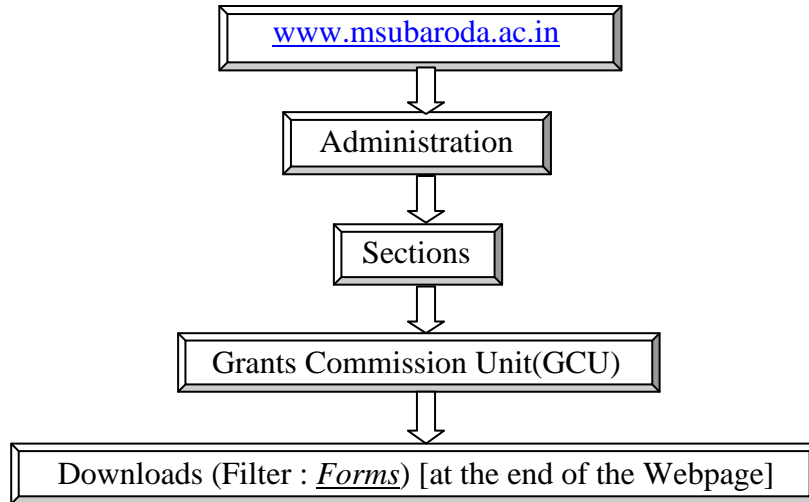
Sub: Revised Format for Application of “NO DUES CERTIFICATE”

Sir / Madam

With reference to the subject cited above, please find enclosed herewith a copy of the Revised Format for Application of “NO DUES CERTIFICATE”, applicable to Permanent Teachers of Faculty / College.

You are requested to circulate this to all the Head of the Department under your Faculty / College, so that the Permanent Teacher who is going to Retire or Resigning from the duties are aware of the format for applying for “No Dues Certificate” from GCU Section. They have to apply for No Dues Certificate in the revised format now onwards, duly filled in all the fields, with necessary enclosures (if any).

The same format can also be downloaded from the University Website;



Kindly take further necessary action accordingly.

Yours Sincerely

Sd/-
Development Officer
For Registrar

Encl. : As above.



THE MAHARAJA SAYAJIRAO UNIVERSITY OF BARODA
VADODARA

Format for "NO DUES CERTIFICATE"

Faculty Ref. No.

Date :

From :

Prof./Dr./Mr./Mrs. _____

Designation : _____

Dept. of _____

Faculty of _____

Permanent Address : _____

_____ (M) _____

To

The Registrar (GCU)

The M. S. University of Baroda

Vadodara.

Subject : ISSUE OF "NO DUES CERTIFICATE"

Sir / Madam

This is to inform you that I, the undersigned is / was working as _____ in the Dept. of _____, Faculty of _____ and is relieved from the University Services due to Retirement / Resignation w.e.f. _____.

I would like to state that :

1. I am NOT working in any Scheme / Project.

2. I have implemented Project / Scheme as under :

a. GCU Reference No. and Date : No.GCU/ _____

b. Name of the Project / Scheme : _____

c. Funding Agency : _____ Implementation Date _____

d. Project / Scheme is over on _____ OR Continue till _____.

e. Certified and Audited Statement of Accounts is submitted : Yes No

If Yes, Please attach a copy of the same.

f. Grant Position :

i. Amount Sanctioned : _____

ii. Amount Released : _____

iii. Expenditure incurred : _____

iv. Balance / Dues : _____

3. I am also involved in other Project / Scheme : YES / NO

If YES, Please give details in another application of "No Dues Certificate"

You are requested to Issue me a "No Dues Certificate", keeping in mind of the above facts which is / are TRUE.

Yours faithfully

(Name of Applicant)

Head of Department
(Sign & Stamp)

Dean / Principal
(Sign & Stamp)

Note : - **Please use separate sheet for each Project / Scheme.**