



YASHODA SHIKSHAN PRASARAK MANDAL, SATARA

NH-4, Wadhe Phata, Satara 415011

Name of the Institute _____

Date:

CLEARANCE / NO DUES CERTIFICATE

(Only for Teaching / Non-teaching Staff)

To,
The Principal,

Respected Sir,

I,..... Designation.....in

YSPM's, faculty of.....

My Clearance / No Dues in various departments is as follows :-

SR. NO.	DEPARTMENT	NAME OF THE INCHARGE	DUES	SIGN
1.	Cashier			
2.	Library Dept.			
3.	Store Dept.			
4.	Est. Section			
6.	H.O.D. / Laboratories (D.S.R.)			
7.	System Administrator			
8.	Transport Dept.			
9.	Boys / Girls Hostel			
10.	GYM / Sports Dept.			
11.	Canteen			
12.	Workshop			
13.	Accounts Dept.			

Thanking You.

Resignation Date (if applicable) :.....

Yours faithfully,

Notice Period: From.....to.....

Sign:.....

Name:

Registrar

Principal

Remark:.....

Date:

President / Vice President