



MTI/HAYATABAD MEDICAL COMPLEX, PESHAWAR

EMPLOYEE CLEARANCE FORM (HR DEPARTMENT)

Employee ID No. _____ Date of Joining _____
Employee Name _____ Father's Name _____
Designation _____ Department _____
Employee Type(Fixed pay/Institutional /Civil Servant) _____
Reason (Resignation/Transfer/Retirement) _____ Cell No# _____

S.NO	DEPARTMENT	NAME OF IN-CHARGE	DESIGNATION	SIGNATURE
1.	Place of Duty/ Own Department			
2.	Security			
3.	Provost (a) Hostel resident / non resident (b) Hostel Name _____ (c) Room No. _____ Vacated <input type="checkbox"/> Yes <input type="checkbox"/> No (d) Any deficiency regarding room allotted <input type="checkbox"/> Yes <input type="checkbox"/> No			
4.	Manager I.T Section			
5.	FINANCE & ACCOUNTS			
	a. Detail of Loans/Outstanding dues <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount Rs.		
	b. Detail of Advance against Salary <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount Rs.		
6.	HUMAN RESOURCE DEPARTMENT			
	a. Any Inquiry pending (Detail)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	b. Experience Certificate issue	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	c. I.T Card Returned	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Superintendent HR _____

Senior Manager HR _____



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CERTIFICATE

The personal file in respect of Dr. Neelam Malik Ex-WMO HMC from page No. ____ to ____ is received by Mr. Saeed Khan S/o Ashraf Khan ward orderly working Litigation Section HMC. The file was required in urgency for writ petition in Peshawar High Court Peshawar today 20/03/2017.

File handover
Record Keeper

File Received by
Saeed Khan Ward Orderly

TO WHOM IT MAY CONCERN

I Mr. Saeed Khan Ward Orderly hand over the said file to Mr.
_____ whose signature & designation are give below.