



भारतीय प्रौद्योगिकी संस्थान इंदौर

खंडवा रोड, इंदौर 453 552

**Indian Institute of Technology Indore**

Khandwa Road, Simrol

Indore 453 552

**IIT Indore**

## JOINING REPORT

Date: \_\_\_\_\_

To,  
The Director,  
Indian Institute of Technology Indore,  
Khandwa Road,  
Simrol, Indore- 453552

Respected Sir,

With reference to the Offer Letter No. \_\_\_\_\_ dated  
\_\_\_\_/\_\_\_\_/\_\_\_\_ and my acknowledge thereof, I report for duty as \_\_\_\_\_ in the  
Discipline of \_\_\_\_\_ from the forenoon/afternoon of the \_\_\_\_\_  
under the mentorship of \_\_\_\_\_.

Yours Faithfully.

Name and Signature of Candidate

Name and Signature of PI

Signature of Head of the Department

Dean R&D



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(All columns are mandatory)

1. Name of the Student \_\_\_\_\_
2. Designation \_\_\_\_\_
3. Date of Joining \_\_\_\_\_ (FN / AN)
4. Project No and Name of PI \_\_\_\_\_
5. Department / Section \_\_\_\_\_
6. Date of Birth \_\_\_\_\_
7. Religion/Community \_\_\_\_\_  
(If belong to Minority Community) Yes / No
8. Category (GEN/SC/ST/OBC(NCL)/PH) \_\_\_\_\_ (Pl. attach copy of certificate)
9. Marital Status \_\_\_\_\_
10. Blood Group \_\_\_\_\_
11. Present Address \_\_\_\_\_
12. Permanent Address \_\_\_\_\_
13. Contact No. \_\_\_\_\_
14. Educational Qualifications (Pl. attach copy of certificate):

Qualification	Institute	Year	Percentage
10 <sup>th</sup>			
12 <sup>th</sup>			
Graduation			
Post-Graduation			
PhD			
Any other			

15. Father's Name \_\_\_\_\_
16. Mother's Name \_\_\_\_\_
17. Father's Contact No. \_\_\_\_\_  
(Mob. and email ID)
18. Dependents \_\_\_\_\_  
(If applicable as per IIT Indore health care rules)

I \_\_\_\_\_ do hereby declare that the information above is true. I also undertake to inform any changes in the above-mentioned information on occurrence of such change. I am fully aware that furnishing untrue information or suppressing of such change any information amounts to willfully furnishing wrong information and giving false declaration.

**Date**

**Signature of Research Staff/Fellow**



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### **Details of Bank Account & PAN Card for crediting salary & other reimbursement**

1	Name of the Applicant	
2	Designation	
3	Date of Joining	
4	Department / Section	
5	Name of Bank	
6	Branch Name/Address	
7	S.B. Account No.	
8	IFSC Code	
9	PAN Number	
10	Aadhar card Number	

This information is furnished for transferring Salary / other benefits in my S.B. Account.

**NOTE: Copy of the front page of the passbook, PAN Card and Aadhar card duly self-attested shall be enclosed for verification and validation for activating the transfer**

Date \_\_\_\_\_

**Signature of the Applicant**



**भारतीय प्रौद्योगिकी संस्थान इंदौर**  
**INDIAN INSTITUTE OF TECHNOLOGY INDORE**  
**मकान किराया भत्ते की मांग हेतु घोषणा प्रपत्र**  
**DECLARATION FORM FOR CLAIMING HRA**

फॉर्म नंबर A7/Form No. A7

1. मैं यह प्रमाणित करता हूँ कि वर्तमान में मैं स्वयं/ मेरी पत्नी/ पति/ बेटे /बेटी/ पिता/माता/ हिन्दू सम्मिलित परिवार द्वारा किराये / स्वामित्व के मकान में निवासरत हूँ, जिसमें मैं सहभागी हूँ।  
I certify that I am residing in a house hired/owned by me/my wife/ husband/ son/daughter/ father/mother/ Hindu undivided family in which I am a copartner.
2. मैं प्रमाणित करता हूँ कि मैं किराए पर कुछ खर्च / किराए के लिए योगदान कर रहा हूँ।  
I certify that I am incurring some expenditure on rent/contribution towards rent.

**अथवा /OR**

3. मैं प्रमाणित करता हूँ कि मेरे द्वारा स्वामित्व वाले घर का किराया मूल्य / एक हिंदू अविभाजित परिवार के स्वामित्व में, जिसमें मैं एक सहभागी हूँ और जिसमें मैं निवास कर रहा हूँ, कार्यालय-ज्ञापन क्र. एफ-2 (37) ई। II (ब) / 64 दिनांकित 27.11.65 के पैरा 7 में निर्दिष्ट तरीके से सुनिश्चित करने योग्य हैं। मैं प्रमाणित करता हूँ कि मैं घर या संपत्ति कर या घर के रखरखाव हेतु भुगतान / योगदान कर रहा हूँ।

I certify that the rental value of the house owned by me/owned by a Hindu Undivided family in which I am a copartner and in which I am residing is ascertainable in the manner specified in para 7 of O.M. No. F-2(37)-E. II(B)/64 dt 27.11.65. I certify that I am paying/ contributing towards house or property tax or maintenance of the house.

4. मैं प्रमाणित करता हूँ कि मैं अपने माता-पिता या बच्चों या पत्नी /पति को केंद्र सरकार, स्वायत्त सार्वजनिक उपक्रम या अर्ध-सरकारी संगठन जैसे कि नगर पालिका, पोर्ट ट्रस्ट आदि द्वारा अन्य सरकारी सेवक को मुफ्त लाइसेंस आवंटित निवास में साझा नहीं कर रहा हूँ।

I Certify that I am not sharing accommodation allotted to my parent or children or wife/ (husband) by the Central Government, an autonomous public undertaking or semi-Government organization as Municipality, Port Trust etc. allotted license fee free to another Government servant.

5. मैं प्रमाणित करता हूँ कि मेरे पति / पत्नी / माता-पिता / बच्चे /, जो / मेरे साथ आवास साझा कर रहे हैं, जो कि केंद्र सरकार के एक अन्य कर्मचारी को आवंटित / स्वायत्त सार्वजनिक उपक्रम या अर्ध-सरकारी संगठन जैसे नगर पालिका, पोर्ट ट्रस्ट आदि हैं, केंद्र सरकार / राज्य सरकार / स्वायत्त सार्वजनिक उपक्रम या अर्ध सरकारी संगठन जैसे नगर पालिका, पोर्ट ट्रस्ट आदि से मकान किराया भत्ता प्राप्त नहीं करते हैं।

I certify that my husband /wife /parents/ children/, who is /are sharing accommodation with me allotted to another employee of the Central Government /autonomous public undertaking or Semi-Government Organization like Municipality, Port Trust etc. is /are not in receipt of house rent allowance from the Central Government /State Government /autonomous public undertaking or Semi- Government Organization like Municipality, Port Trust etc.

6. मैं यह भी प्रमाणित करता हूँ कि मेरी पत्नी / पति को केंद्र सरकार द्वारा एक ही स्थान पर स्वायत्त सार्वजनिक उपक्रम या अर्ध-सरकारी संगठन जैसे नगर पालिका, पोर्ट ट्रस्ट आदि द्वारा पारिवारिक आवास आवंटित नहीं किया गया है।

I also certify that my wife /husband has not been allotted family accommodation at the same station by the Central Government, and autonomous public undertaking or semi- Government Organization such as Municipality, Port Trust etc.

स्थानीय पता जिसमें निवास करते हैं \_\_\_\_\_ हस्ताक्षर/Signature: \_\_\_\_\_

Local Address in which residing:

नाम / Name: \_\_\_\_\_

पद/ Designation: \_\_\_\_\_

विभाग /Dept: \_\_\_\_\_

**टिप्पणी /Note:**

यह प्रमाणित किया जाता है कि श्री / डॉ. / श्रीमती----- ने अतिथि गृह / संस्थान आवास दिनांक-----को खाली कर दिया है।

It is to certify that Mr./Dr./Smt./\_\_\_\_\_ has vacated guest house / Institute accommodation w.e.f. \_\_\_\_\_

(यदि कोई कर्मचारी संस्थान के आवास में रहता है तो यह आवश्यक है)

(It is required if an employee stays in Institute accommodation)

प्रतिलिपि /To,

सं. कुल. JR (प्रशासन /Admin)

प्रभारी के हस्ताक्षर (अतिथि गृह/ संस्थान आवास)

Signature of In-charge (Guest House/Institute accommodation)

## **UNDERTAKING**

1. I/We \_\_\_\_\_, here by agree that I shall abide by the admissible rules and regulations, concerning discipline, attendance, etc. of the Institute (IIT Indore) and follow the code of conduct prescribed, as in force from time to time and subsequent changes / modifications / amendment made thereto. I acknowledge that the Institute has the authority of taking disciplinary actions on me for non-compliance of the same.
2. I/We hereby undertake to show due respect to the Principal Investigator and other Institute bodies and respect their decisions. Principal Investigator of the project will be the main point of contact for all the research and project related matters.
3. I/We hereby agree that I/We shall conduct ourselves within and outside the precincts of the Institute in a manner befitting the reputation of the Institution.
4. I/We hereby undertake that academic fraternity will not be contacted with a tendency to disturb the peace and tranquility of the administration of IIT Indore.
5. I/We hereby declare that, I shall be solely responsible for my involvement in any kind of undesirable/ indisciplinary activities outside the campus, and shall be liable for punishment as per law. I, further understand that, the Institute shall in no way provide any support to me and will not be held responsible for my any such action.

Date:

Name and Signature