



UNIVERSITY OF LORALAI

ACCESS

QUALITY

RELEVANCE

JOINING REPORT

No. _____

Dated _____

☐ **ON APPOINTMENT**

☐ **ON TRANSFER**

I hereby report for duty as: Designation _____ on _____

☐ FN ☐ AN In pursuance of letter No. _____ dated _____

☐ **ON AVAILING LEAVE**

After availing _____ days of leave from _____ to _____

I hereby report for duty on _____ ☐ FN ☐ AN as checked below:

- | | |
|--|---|
| 1. <input type="checkbox"/> Extra Ordinary Leave (without pay) | 2. <input type="checkbox"/> Leave Ex - Pakistan |
| 3. <input type="checkbox"/> Extra Ordinary Leave (with pay) | 4. <input type="checkbox"/> Earned Leave |
| 5. <input type="checkbox"/> Study Leave | 6. <input type="checkbox"/> Medical Leave |
| 7. <input type="checkbox"/> Maternity Leave | 8. <input type="checkbox"/> Leave (with full pay) |
| 9. <input type="checkbox"/> Leave (with half pay) | 10. <input type="checkbox"/> Special Leave |

Employee Name: _____ Designation: _____

Department: _____ Signature: _____

Chairman/Head of Department: ☐ Forwarded ☐ Withheld

Remarks: _____

Name: _____ Signature: _____ Date: _____

Dean Concerned: ☐ Forwarded ☐ Other

Remarks: _____

Name: _____ Signature: _____ Date: _____

Registrar: _____

Signature: _____ Date: _____

☐ **Seen**

Competent Authority: _____

Remarks if any: _____

Signature: _____ Date: _____