



GAUHATI UNIVERSITY :: GUWAHATI

JOINING REPORT

Memo No. GU/Estt./T-300/20..../

Ref. office of appointment under Ref. No. GU/Estt./GU.1006/2023/6709

Date: 03-05-2023

1. Name in full	<u>SMITA KATAKY</u>
2. Date of Birth	<u>15-03-1994</u>
3. Name of the Post	<u>Academic Counsellor</u>
4. Relieving order No. & date (Pl. enclosed copy)	
5. a) Permanent address	<u>Purbanchal Nagary, Near P.H.E, Hengrabaru, GHY-36.</u>
b) Contact Address (with Email & Mobile number)	<u>e-mail - smitakakaty@gmail.com P.NO - 7002537015</u>

I do hereby accept the terms and conditions of the offer of appointment vide the reference cited above and also agree to abide by the terms and conditions of the service at this University. I am therefore be allowed to join the University for my duties as academic counsellor with effect from (date) 04/05/23 at (time) 10:00 A.M./P.M. as per the offer of appointment.

Date 04/05/23

Smita Kakaty
Signature of the candidate

FOR OFFICE USE

Certificates and other necessary papers verified and found correct. Subject to being declared medically fit by the Medical authority of the University, Dr./Shri/Smt. Smita Kakaty may be allowed to join the University provisionally as Academic Counsellor in the Deptt./Branch/Centre of Education on (Date) 04.05.23 (forenoon/afternoon)

[Signature]
Joint/Deputy Registrar

[Signature]
4.5.23
Suptd. Establishment

[Signature]
Dealing Assistant 4/5/23

Approval of the Registrar: [Signature]

Copy for information and necessary action to:

1. Treasurer, G.U.
2. The Secretary, University Registrar
3. The Head/Principal, Department, G.U.
4. The Statistician, G.U.
5. Person concerned
6. Office file

[Signature]
Director

DIRECTOR
GUCDOE, GAUHATI UNIVERSITY