



# हरियाणा केन्द्रीय विश्वविद्यालय/CENTRAL UNIVERSITY OF HARYANA

## Application for Refresher Course/Orientation Programme/Induction Programme

1. Name : .....
2. Designation : .....
3. Department : .....
4. Date of Joining : .....
5. Applied for:

Sr. No.	Refresher Course/ Orientation Programme/ Induction Programme	Duration		Conducted by	Place
		From	To		

6. I have attended following Refresher Course/Orientation Programme/Induction Programme in the past:

Sr. No.	Refresher Course/ Orientation Programme/ Induction Programme	Duration		Conducted by	Place
		From	To		

7. I certify that I will submit a copy of the Certificate after completion of the above program to the Office of the Registrar. I will not claim any financial assistance from the University for the above programme.
8. Invitation from conducting Institution/organization is attached.

Date: .....

Signature of the Applicant

### Recommendation of the HoD/Teacher In-Charge

9. I recommend his/her application.
10. Certified that the Course/Research/Academic work will not be hampered during the above-mentioned period and the work load will be shared by the teachers within the department.
11. Number of teachers available during the above period in his/her absence.....
12. Name and Designation of the persons who will perform/discharge the duties (Academic/ Administrative etc.) of applicant in his/her absence.

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature

Entered in Department's Register at Page No \_\_\_\_\_, Ser. No. \_\_\_\_\_

Date: .....

Signature of the HoD/TIC

स्वीकृति हेतु अनुशंसित  
Recommended for sanction

अनुमोदित / अस्वीकृत  
Approved / Rejected

अधिष्ठाता/Dean

कुलपति/Vice-Chancellor

कार्यालयीन उपयोग हेतु /For Office Use only

Entry made for Refresher Course/Orientation Programme/Induction Programme in the Register

गणक के हस्ताक्षर

सहायक कुलसचिव / उप कुलसचिव