



## **CMR TECHNICAL CAMPUS**

**UGC AUTONOMOUS** 





## **NO DUES FORM**

(for Staff)

Name of the Staff:	Email ID:
<b>Designation:</b>	Department:
Date of Joining:	Date of relieving:

S.No	Department/Section	Dues, if any (Yes/No)	Name of the Official	Signature	Date
1	Accounts(S3)				
2	Establishment(S1)				
3	Exam Section(S4)				
4	Canteen				
5	Physical Education	7			
6	T&P	, W	A I )		
7	LIBRARY	/ \			
8	CSE	71 1			
9	CSE[AI & ML]				
10	CSE[DS]	INICA	L CAMP	US	
11	IT provide	0.00	TZV LADVICE	1.75	
12	ECE	LOKE	TOINVE	4 1	
13	Mechanical				
14	Civil				
15	H&S				
16	MBA				
17	Transport				