### Form ii: eoffice- New User /Additional Charge/Transfer/Promotion Charge

(Fill separate form for each individual)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **\*Name** | **\*Designation** | **\*Employee No.** | **\*Date of Birth** | **\*Office Name** | **\*Mobile No.** | **\*Mail ID** | **Date of Joining in UJVNL\*** |
|  |  |  |  |  |  |  |  |

**Note: Tick the box which is applicable.**

(All fields marked with \* are mandatory)

1. **New User**☐
2. **Additional Charge** ☐

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| * **Additional Charge** ☐   No of Additional Charge   |  | | --- | |  |  |  | | --- | |  |   Temporary ☐ (**Note: valid for 90 Days only)** Permanent Charge ☐   |  | | --- | |  | |  | |   Additional Charge Office Name    Additional Charge Designation  Date of Joining on Additional  Charge |

1. **Transfer/Promotion Charge** ☐

**Office Name :**

|  |  |  |  |
| --- | --- | --- | --- |
| |  | | --- | |  |     From | |  | | --- | |  |   To |

**Designation Name :**

|  |  |
| --- | --- |
| Old Designation Name ……………………………… | New Designation Name…………………………… |

**\*Reporting Officer \*Reviewing Officer \*Final Authority**

**Name Name Name**

**Designation Designation Designation**

**F.B.No. F.B.No. F.B.No.**

**(\*Please sign and submit this form to email ID:** [**eoffice@ujvnl.com**](mailto:eoffice@ujvnl.com) **and submit relevant document in case of Transfer & Promotion)**

**For IT office use only:**

|  |  |
| --- | --- |
| **Request No:** |  |
| **Fulfilled by:** |  |
| **Completed on:** |  |
| **Remarks if any concern:** |  |