

**SANT LONGOWAL INSTITUTE OF ENGINEERING & TECHNOLOGY,
LONGOWAL**

MONTHLY STATEMENT OF EMPLOYEES		Dispatch No. :		
		Date :		
		Event Duration	From	
To				
Department				

A. Details of Employees who have joined in the Department / Section in the Event Duration					
Employee Code	Name	Designation	Date of Joining	Reasons / Remarks, if any	
B. Details of Employees who have been relieved from the Department / Section in the Event Duration					
Employee Code	Name	Designation	Date of Joining	Reasons / Remarks, if any	
C. Details of Employees who are on Extra Ordinary Leave (EOL) / un-authorized Leave* / absence from the Department / Section in the Event Duration.					
Employee Code	Name	Designation	Duration		Remarks, if any
			From	To	
Prepared by		Checked by		HOD / Section Incharge	
Note:					
1.	It is mandatory to fill all the requisite information in the format.				
2.	Event Duration must be from 16 th of last month of 15 th of current month.				
3.	This sheet must reach to Administration Section by 20 th of every month. In case Event Sheet is not received by the specified date, Salary will not be prepared and responsibility lies on the concerned HOD / Section Incharge.				
4.	Details of unauthorized absence / absconding employee must be sent separately to Establishment Section for disciplinary action.				
5.	*Authorized leave means leave sanctioned and order issued by Administration Section in case of all type of leave including Ex-India leave, except CL / RH.				
6.	If any alteration needed in the format, the same may be brought to the notice of Dy.Registrar (Admn.) for necessary action.				