

STAFF DATA FOR ID CARD PURPOSE

Employee No : _____

Name : _____

Designation : _____

Department : _____

Joining Date : _____

Retirement Date : _____

Blood Group : _____

Date of Birth : _____

Father/ Husband Name : _____

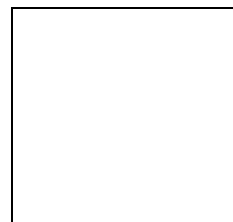
Residential Address : _____

Email – ID : _____

Contact No : _____

Bar Code No : _____

Signature of the Staff : _____



The above details has been verified by me and found correct.

Head of the Department/Section