

**NORTH EASTERN REGIONAL INSTITUTE OF  
WATER AND LAND MANAGEMENT  
DOLABARI, P.O. KALIABHOMORA  
TEZPUR - 784 027**

**JOINING REPORT**

I, .....rejoin  
(Name & Designation)

my duties on .....(AM/PM) after availing EL/HPL/EOL .....  
of.....days from.....to.....  
vide sanction letter No. NRW/ADM/.....  
dated.....

Date: ..... Signature  
-----  
(For office use only)

Remarks of forwarding authority

Date: ..... Designation ..... Signature  
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Entered in Personal file Note Sheet No/Service Book at Serial No. ....

Date: ..... Designation ..... Signature  
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Date: ..... **Director**