

Handover Note

Purpose : All employees are required to fill in the below form during their resignation, transfer and long period of leave to ensure the smooth running of operations in their department during their absence from duty

Name of Employee Handing Over	<input type="text"/>
Designation	<input type="text"/>
Employment No	<input type="text"/>
Department	<input type="text"/>
Reporting To	<input type="text"/>
Purpose of Absence	<input type="text"/>
Date Absence From	<input type="text"/>
Date Absence To	<input type="text"/>

Details of Documents To Handed Over

SR #	Name of Documents	Location of Documents	Remarks
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature of Handing Over Employee

Signature of Handover Receiver

Signature of Dept. Head

Signature of Dept. Head