## **JOINING REPORT**

		Da	te:		
From,					
Name					
Address					
	he Head,				
To, The Regi NITK, Su					
Respected Sir/ Ma	adam,				
Sub: Joining to	o the post of				
Ref.: Offer	of Appointment No.:				dated
	<del></del>	**			
I	(Name), _		(Applic	cation Number)	join for
duty on	(Forenoon/ Afternoon) a	as			in
the Department/	School	at NITK,	Surathkal	against the O	ffer of
Appointment refer	eed above.				
I have read and u	nderstood the terms and conditio	ns mentioned in t	he above Of	fer of Appointme	ent and
agree to abide by	them and the Rules of the Institut	te.			
I thank NITK, Sura	athkal for opportunity provided to	me to work and in	nprove my sł	cills.	
				Yours fa	ithfully,
		Signature:			
		<u> </u>			n date)
		Name:			