Check List for Passport NOC

| No. | Details | Remarks |
|-----|--|--------------------|
| 1 | Full Name(In Block Letters) | |
| 2 | Designation with Department | |
| 3 | Pay Scale with grade pay | |
| 4 | Present Posting | Medical College |
| 5 | Working at present place since | |
| 6 | Birth Date | |
| 7 | Date of Retirement | |
| 8 | Nationality | |
| 9 | Details of Primary/Departmental/Criminal case/Inquiry pending/continue/proposed | |
| 10 | Details of Government Dues/Recovery | |
| 11 | Enclosures-3 recent Passport size photographs | Yes/NO |
| 12 | Detail of Head of Department/Concerned Police Clearance Certificate as per GAD's Resolution dtd.5/6/2003 | Attached Yes/No |
| 13 | Additional information | |

Signature of Dean Concerned Medical College