

ICAR RESEARCH COMPLEX FOR GOA
(Indian Council of Agricultural Research)
ELA, OLD GOA, 403 402, GOA

**CERTIFICATE OF HANDING OVER OF CHARGES WHILE PROCEEDING ON
LEAVE**

Certified that I have in the forenoon/afternoon of this day _____
handed over/received charge of the post _____ at ICAR
Research Complex for Goa, Ela, Old Goa.

Handed over by :
Name :
Designation:
Date:
Place: **Old Goa**

Taken over by:
Name :
Designation:
Date:
Place: **Old Goa**

Signature of the Sectional Incharge
Name :
Designation:
Date:
Station: **Old Goa**

Signature of the Sectional Incharge
Name :
Designation:
Date:
Station: **Old Goa**

Countersigned by Director
Name : **Dr. N. P. Singh**
Designation: **Director**
Date:
Station: **Old Goa**