

**BABCOCK UNIVERSITY
HUMAN RESOURCES DEPARTMENT
ASSUMPTION OF DUTY FORM FOR CASUAL**

Name.....Department.....

Position..... Phone No..... Email.....

Staff No..... Gender..... Marital Status.....

Date of Assumption of duty.....

Date of Birth (Day...../Month...../Year.....)

Qualifications with date.....

Name of Previous Employer.....

To: Director, Human Resources

This is to certify that I reported for duty at (Unit/Dept/Div.).....

- On First appointment
- On transfer
- Others (specify).....

Bank Information

Supervisor's Comment.....

Supervisor's Name & Signature.....

Name of HOD..... Signature & Date.....

Division Head's Comment.....

Name of Division Head..... Signature & Date.....

Signature of Staff..... Date.....

DHR's Signature..... Date.....

NOTE: Form should be completed by the officer concerned and passed through his/her Head of Unit/ Department/Division who will confirm its accuracy, and return same to Human Resources Department before salary will be paid.