



# RAIPUR INSTITUTE OF MEDICAL SCIENCES

## 650 Bedded Hospital & Medical College

Health For All

### Presence Agreement

I.....(Name), am joining as .....(Designation).  
I agree that

- I will follow roster including Sunday and festival (holiday) roster as per the departmental Requirement as posted from time to time (Agree)   
OR  
I will be on duty from ..... to ..... or ..... hours per day. (Agree)
- Whatever be my duty hours, I will do double punch every day both for incoming and outgoing. (Agree)
- I can take leave only if there is a reliever available and willing to completely take over my Responsibilities. The reliever will be responsible for all of my duties. (Agree)
- I will intimate 3 working days in advance if I take planned leave. (Agree)
- My salary will be made as per biometric attendance and my presence in Hospital/College. I know that I can not leave my duty station after punching biometric and doing so will cause my salary deduction. (Agree)
- If I am going outside of Hospital/College during my working hours, I will get outdoor Duty (OD Form) Signed from my HOD and Dean. (Agree)
- I will sign my salary sheet along with my HOD and Dean to ensure that I agree with monthly salary paid to me and I will not dispute the same at any later date. (Agree)

Date:-

Signature

(A unit of LORD BUDDHA EDUCATIONAL SOCIETY)

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