

**ADIKAVI NANNAYA UNIVERSITY::RAJAMAHENDRAVARAM  
ANDHRA PRADESH**



Dr. M. Kamla Kumari  
**Dean, College Development Council**

Ph. No:0883-2566009  
Email:cdcanudata@yahoo.com

No. ANUR/CDC/ Staff Ratification /2018-19/49

Date: 16-05-2019

To  
The Managements and Principals of all Affiliated Education Colleges,

**CIRCULAR**

Sub : ANUR – CDC – Affiliated Education Colleges -Staff Ratification - Reg.  
Ref: Proceeding of the Vice - Chancellor, No.ANUR/CDC/Edu./Staff Ratification/2018-19/24,  
dt. 17-04-2019.

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It is noticed that some of the Education colleges have not responded to staff ratification as per the schedule. Such colleges should get staff ratified for the academic year 2019-20 as scheduled on - 17-05-2019 (date to be fixed by the University authorities) without fail. If any fees dues payable to the University may please be paid immediately.

The name of the colleges without staff ratification will not be included in the list of colleges sent to Ed.CET -2019-20.

DEAN CDC

Copy to :

The Web Master, ANUR for uploading in the ANUR Website & keeping SMS to the Colleges (through E-mail). The PS to the Vice-Chancellor, the PA to the Rector,  
The PA to the Registrar & OOF.

## Under Taking for the Period of 2019-20

I, ----- Secretary and Correspondent, -----  
Affiliated to Adikavi Nannaya University do here by solemnly state as follows:

I am the Secretary and Correspondent of ----- affiliated to Adikavi Nannaya University here by agree and accept to continue the following faculty members approved by Adikavi Nannaya University, Rajahmundry for a period of one year from the date of execution of this Under Taking.

Further I hereby declare that I as Secretary and Correspondent of -----will not ask any one of the faculty members to resign or terminate from the post within one year from the date of execution of this Under Taking without any valid reasons. I also hereby declare that if for any reason the management requires any member of the faculty to resign for the post under disciplinary grounds or under any other unavoidable circumstances within one year I shall cause a show-cause notice served on the faculty member well in advance under copy to the Adikavi Nannaya University. I further declare that any action against such member shall be taken only after obtaining permission from Adikavi Nannaya University.

S.No	Name of the Faculty Member	Designation

Signature

(Secretary/Correspondent)

(By Faculty member on 10/- Non Judicial Stamp Paper )

AFFIDAVIT

I,-----S.S.C.Reg No.)S/o----- residing at  
----- do hereby solemnly state as follows:

I hereby declare, give my consent and willingness to continue in the post of Principal/Lecturer in -----  
----- and approved by Adikavi Nannaya University, Rajahmundry for not less than one  
year from this date.

I hereby declare further that I will continue in the post for not less than one year compulsorily and  
continue beyond one year also. If I wish to quit/resign from the post of Principal/Lecturer in -----  
----- within one year or beyond one year due to unavoidable circumstances I shall  
inform the same to the college and also to the authorities of Adikavi Nannaya University, Rajahmundry  
and only after obtaining their permission in writing I shall quit /resign. Further, I declare that I am not  
working elsewhere except in this college.

Deponent

Solemnly affirmed and signed before me on this day of ----- 2018 at -----

## **DECLARATION**

1. On behalf of the Educational agency of the Institution /Colleges, I-----  
Son/Daughter/Wife of ----- do hereby declare that NCTE /University  
/Govt rules, regulations and orders issued have been fulfilled, I also declare that we shall  
abide by the conditions, rules and regulation guidelines for staff selection and staff  
ratification, accordingly staff of the college have been recruited through staff selection  
committee and the same staff are being ratified by the University for the academic year  
2017-18 as detailed below and the same staff are continued without having any  
changes in staff appointments for academic year 2018-19.

<b>S.No</b>	<b>Name of the Staff</b>	<b>Date of Birth</b>	<b>Designation with subject specialization</b>

I also declare that the particulars of given staff are correct to the best of my knowledge,  
and they are not working in any college except in this college.

Signature

Name of the Secretary/Correspondent:

Name of the College:

