

Dated, June 23, 2021

## **NOTICE**

This is for information of all concerned that the working/retired employees and their family/extended family members who have not been vaccinated with 1<sup>st</sup> Dose so far, may fill-in a Form (*attached herewith*) to record their registration. The filled-in Registration Form may be sent as an attachment to the e-mail (pic.hospital@iiests.ac.in) of the Professor-in-Charge of Institute Hospital. This may also be physically submitted to the Institute Hospital between 11 A.M. – 1 P.M. on the working days. In case of physical submission, a photocopy of the filled-in Form needs to be produced to get it acknowledged officially. The deadline of sending/submission of the filled-in Form will be 30<sup>th</sup> June, 2021. In case any further query the undersigned may be contacted.

Prof. Debabrata Mazumder

(Professor-in-charge, Institute Hospital)

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## Updated Registration form for <u>First Dose of COVID-19 Vaccine</u> at IIEST, Shibpur (for employees/retired persons and their family members/extended family members, who have not been vaccinated so far)

1. Name		:		
2. Department/School/Center/ Section		:		
3. Designation & Employee ID		:		
4. Mobile No.		:		
5. Deta	ails of persons (self, family member a	and extended	family member) fo	or whom vaccination
is requ	uired.			
Sl. No.	Name (in Capital letters)	Year of birth	Relationship	Type (Self/ Family Member/Extended Family member)
1				
2				
3				
4				
5				
6				
7				
	You may add maximum 6 nos. of fam	ily and extend	led family membe	rs
Signature with date				