

"Say Yes to Life/Say No to Drugs"



**Ch. Sarwan Kumar Himachal Pradesh Krishi Vishvavidyalaya
Palampur, District Kangra – 176 062 (H.P.)
Office of the Registrar, General Administration Branch**



☎: 01894-230383 Fax: 01894-230511 Email: registrar@hillagric.ac.in

No.QSD.8-8/18-CSKHPKV(GA)/-

Dated: Palampur, the:-

71719-853

2 NOV 2021

To

All the Statutory Officers,
CSKHPKV, Palampur.

All the Heads of the Deptt./Office/Unit,
CSKHPKV, Palampur.

Subject: Regarding COVID-19 Vaccination.

Sir/Madam,


I am to inform that the vaccination camp for left out employees and students of the University in the age group of 18+ will be organized very shortly in the University Health Centre with the help of State Health Authorities.

You are, therefore, requested to send the detail of left out employees (teaching/non-teaching) and students, working/studying under your control who are to be vaccinated, on the format prescribed below, to this office immediately:

| Sr. No. | Name | Age | Student/Employee | Vaccination | |
|---------|------|-----|------------------|----------------------|----------------------|
| | | | | 1 st Dose | 2 nd Dose |
| | | | | | |
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You are also requested to provide the information regarding number of employees (teaching/non-teaching) and students, working/studying under your control who have already been vaccinated with 1st and 2nd dose of COVID Vaccine.

Yours faithfully,


Registrar,
CSKHPKV, Palampur

Copy to:-

1. The Senior Medical Officer, University Health Centre, CSKHPKV, Palampur.
2. The Incharge UNC, CSKHPKV, Palampur for uploading the letter in the University website
3. The Secy. to Vice-Chancellor, CSKHPKV, Palampur.