



SOUTH EASTERN UNIVERSITY OF SRI LANKA

To be filled in duplicate

.....
.....
.....
.....
(Name, address & Date)

Vice Chancellor
South Eastern University of Sri Lanka

Through: Dean/ Faculty of

Dear Sir,

Assumption of duties

With reference to your letter no.: dated, I am pleased to inform you that, I have accepted the appointment as
..... at the Dept. on the terms and conditions stated therein and assumed duties with effect from

Yours faithfully,

.....
(Signature)

I confirm the date of assumption of duties by w.e.f

.....
Head of Department

For the use of Establishment Division

Bursar
SEUSL

Since Mr. /Mrs. /Ms. /Dr /Prof has assumed duties at with effect from please take necessary steps to pay the salary according to the letter of appointment issued to him/her

.....
Deputy Registrar /Academic Establishments