

giBS
Gitarattan International Business School

Staff Identity Card Form

Paste your
Stamp Size
Photograph
Here

Name of the Staff : _____
Designation : _____ Dept.: _____
Address : _____

Phone : _____ (R) _____ (M) Blood Group: _____
Date of Birth : _____ Employee No: _____
Father's Name : _____
Phone : _____ (O) _____ (M)
In Case of Emergency : _____
Emergency Phone : _____ Mark of Identification: _____

Signature of Director

Signature of Administrative Officer

Signature of Employee

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