

FORM XV
(see rule 45)
REQUEST TO WITHDRAW OR CANCEL CERTIFICATE OF REGISTRATION

Name of Trade Union: -

Registration Number: -

(Address):

Date this day of 20.....

To,

The Registrar/ Deputy Registrar of Trade Unions,

.....

The above mentioned Trade Union desires that its certificate of registration under Industrial Relations Code ,2020 may be withdrawn (or cancelled) and at a general meeting duly held on the..... day of 20 it was resolved as follows:

Here gives exact copy of Resolution
(Signed)

Notes :

- Please use Prescribed Form for the Application.
 - Please fill the Application form completely and correctly.
 - ID proof with Name, Occupations and Addresses of work of at least 7 members mentioned in the application attached.
 - The form contains the signature details of the authorised.
 - The form signed by the 7 members of the Trade Union.
 - The copy of the rules of the Trade Union attached.
 - The registration certificate of the Trade Union attached.
 - Address proof of its head office of the Trade Union mentioned in the application attached.
 - The Notices of General Body Meeting to all members attached.
 - The resolution copy for Cancellation of Trade Union signed by at least two third of the total number of its members attached.
 - The copy of attendance register attached.
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