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## Relieving Letter for Exam Duty

**[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]**

**[Recipient's Name]  
[Recipient's Position]  
[School/Institution Name]  
[School/Institution Address]  
[City, State, ZIP Code]**

**Subject: Request for Relieving Letter for Exam Duty**

**Dear [Recipient's Name],**

**I hope this letter finds you well. I am writing to request a relieving letter to be relieved from my current duties to participate in exam duty for [specific exam or institution].**

**Details of Current Position**

* **Employee ID: [Your Employee ID]**
* **Designation: [Your Designation]**
* **Department: [Your Department]**
* **School/Institution Name: [School/Institution Name]**

**Exam Duty Details**

* **Exam Duty Position: [Position, e.g., Invigilator, Supervisor]**
* **Exam Name: [Exam Name]**
* **Exam Dates: [Start Date] to [End Date]**

**Reason for Request  
Participating in exam duty is a professional commitment, and your support by providing a relieving letter will facilitate my participation. It will also ensure that I fulfill my obligations without causing any disruption to my current responsibilities.**

**Handover Process  
I have coordinated with [Colleague’s Name] to ensure a smooth handover of my duties during my absence. All pending tasks will be completed, and necessary instructions have been provided.**

**Contact Information  
Please contact me at [Your Phone Number] or [Your Email Address] if any further information or clarification is needed.**

**I kindly request that the relieving letter be issued at the earliest convenience, enabling me to fulfill my exam duty responsibilities efficiently.**

**Thank you for your understanding and cooperation.**

**Sincerely,  
[Your Name]**