NOTICE

That this Court has implemented 'Case Management System' for monitoring cases pertaining to a particular Ministry, Department, Universities, Corporation, Boards etc. of Central and State Governments. For availing the said facility, the Department, Universities, Corporation, Boards are required to give a request to the Registrar (Computerization) in the prescribed proforma (Annexure-A) through the Principal Secretary or Secretary or Heads of the Departments or the officers of the equivalent rank.

Joint Registrar (Computerization and I.T)

Annex: A

Punjab & Haryana High Court, Chandigarh Registration Form for Access to Case Management System

Read the instructions given below, the completed application form, duly signed by the Head of Department/ Secretary should be submitted to Joint Registrar (Computerization). Please use CAPITAL LETTER.

1.	Name	
2.	Designation .	
3.	Office	
4.	Ministry / Organisation	
5.	Department	
6.	Contact Address	
7.	City/ State	
8.	Telephone Number with STD code	-
9.	Mobile Number	
10	.Email Address (official	
	on Govt. Domain) I will keep the user id and password se unauthorized use of the user id assign	ecure and that the consequences of any ed shall be borne by me and that I shall t indemnified against any claim arising
2.	I shall not make the PUNJAB & HARYAN misuse of my account for any reason.	
3.	sole responsibility. The Punjab & Haryana High Court and correctness of the contents including	
4.		er, due to unforeseen technical issue, if rect for any reason. Neither the Punjab
	This account will be deactivated, if no User Id along with data will be deleted date of deactivation if no request for a	t used for 120 days. I after a period of 6 months from the
	ate: ace:	Signature of the Applicant
Re	ecommended for creation of user ID.	
He	ead of Department/Secretary ,	
	ote:Contact Punjab & Haryana High Cou ebmaster-phc@indianjudiciary.gov.in fo	

FOR OFFICE USE

Approved for creation of account for Case Management System.

Signature of High Court Coordinator With date and seal.

Signature of NIC PHHC Coordinator.

ssigned login ID : emarks :	Date of Crea		
		User Created By:	
		Signature	
	Name :		
	Designation :		
	Date:		