Declaration

I hereby declare that my father/mother are dependent on me/are not dependent on me and their monthly income from all reliable sources is not more than Rs.1500/- / more than Rs.1500/-. They are residing / not residing with me.

2.	My	Wife/	Husband	is	working	in	
	•••••	••••••	••••••	•••••	••••••		
3.	It is a below:	also certified that a	nt present my	residentia	al address is as gi	ven	
	•••••		•••••	•••••			
	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	••••••		
4.	My family details are given below:-						
	Sl.No.		Date of B				
	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	••••••		
	1	•••••	•••••	•••••	•••••		
	2	•••••••••••	•	•••••	•••••		
	3	•••••	•••••	•••••	•••••		
	5	•••••	•••••	•••••	•••••		
	6	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	•••••		
	7	••••••••••	•	•••••	•••••		
	8	••••••	••••••	•••••	•••••		
	Dated:						
					(Signa	ature)	
	Name:						
	Designation Emp. Code No						
				Cont. Phone (Off)			
			Interc	(Res.)			
				,	,		

DECLARATION

I, Dr./	Shri/Shrimati/Kumari declare as under:				
*(a)	That I am unmarried/ a widower/ a widow.				
*(b)	That I am married and have only one wife living.				
*(c)	That am married and my husband has no other living wife, to the best of my knowledge.				
*(d)	That I am married and have more than one wife living . Application for grant of exemption is enclosed.				
*(e)	That I am married to a person who has already one wife or more living. Application for grant of exemption is enclosed.				
@	That I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after my appointment, I shall be liable to dismissed from my service.				
Dated:	(Signature)				
	Name Emp. Code No E-mail.				
*	Delete clauses not applicable.				

Applicable in the case of clauses (a), (b), (c) only.

@