

भा. प्रौ. सं. मण्डी 175 075 (हिमाचल प्रदेश)
IIT Mandi 175 075 (Himachal Pradesh)

DECLARATION BY PARENTS

I, Shri / Ms. _____ hereby declare that my income from all sources such as pension/family pension, income from investments, immovable property etc. does not exceed ₹ 9,000/- (plus amount of dearness relief thereon drawn (not due) on the basic pension of ₹ 9,000/-) as on today and I am totally dependent on my son/daughter/son/daughter-in-law Ms./Shri _____ Designation _____ School/Section _____.

I request that, I be considered as dependent on my son/daughter/daughter-in-law in her/his service records for the purpose of availing LTC & Medical benefits.

PAN: _____

(Photo copy to be enclosed)

UID: _____

If there is no information, please mention

Bank A/c No(S): _____

as 'Not available'

The above statement is true to the best of my knowledge and belief.

Signature:- _____

Name:- _____

Date : _____

Address:- _____

Place: _____

Signature of two witnesses

(1) Signature: _____

(2) Signature: _____

Name: _____

Name: _____

Address: _____

Address: _____

Date: _____ Place: _____

Date: _____ Place: _____

Forwarded to the Registrar for consideration

Signature of Employee (of IIT Mandi) :- _____

Name :- _____

Designation :- _____

Department :- _____