

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

प्रशासनिक फॉर्म सं. _____
ADMIN. FORM NO. _____

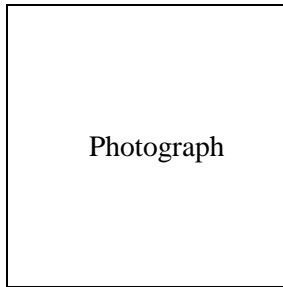
DECLARATION BY EMPLOYEE

I, Shri / Ms. _____ Designation _____
School / Section _____ hereby declare that my sister
Ms _____ (D.O.B. / /) does not have any income. She is
unemployed and unmarried. She is _____ (occupation).

I also state that subsequent change in the aforementioned status, if any, will be intimated to
Administration Section, for incorporation of such changes in the records.

I am aware that I am solely responsible for the correctness and accuracy of the above declaration and
understand that providing false information amounts to misconduct and may attract disciplinary
proceedings.

- **Copy of PPO enclosed.** (Strike if not applicable)



Signature:- _____

Name:- _____

Address:- _____

Date : _____

Place: _____

Signature of two witnesses

(1) Signature: _____

Name: _____

Address: _____

Date: _____ Place: _____

(2) Signature: _____

Name: _____

Address: _____

Date: _____ Place: _____