भा. प्रौ. सं. मण्डी 175 075 (हिमाचल प्रदेश)

प्रशासनिक फॉमम सं. ADMIN. FORM NO.

IIT Mandi 175 075 (Himachal Pradesh)

**DECLARATION BY EMPLOYEE**

I, Shri/Ms. Designation School/Section hereby declare that my father Shri and my mother Ms. do not have an income of more than ₹9,000/- p.m. from all sources including income from investments, house or immovable property etc. I further, hereby declare that my father / mother does (not) get any pension\*/ family pension\* and are totally dependent on me.

No objection from my following siblings are also enclosed.

(1) (3)

(2) (4)

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)

|  |  |
| --- | --- |
| Photograph | Photograph |

Signature :- Name :-

Date :- Employee Code :-

Place :- Designation :-

Department :-

Signature of two witnesses

(1) Signature: (2) Signature: Name: Name: Address: Address:

Date: Place: Date: Place: