

## **Sample Consent / Declaration / undertaking to be taken from employees**

"I \_\_\_\_\_, EMP ID \_\_\_\_\_, holding aadhaar number \_\_\_\_\_ hereby provide my consent to my employer **M/S - Pfizer Limited / Pfizer Product India Private Limited** for sharing my aadhaar to EPFO for the purpose of establishing my identity for registration and various benefits under EPF & MP act and its schemes. I, as Aadhaar holder is aware that information provided by me will be used for authenticating identity through Aadhaar Authentication system for the purpose stated above and no other Purposes"

Signature

Employee Name -

Date -

Countersigned / Verified by the Employer