DECLARATION FOR SEEKING TRANSFR BENEFIT OF SINGLE PARENT

	I, Sh./Smt	/Ms		. (name	of the	employee	e),	(post),
	nly declare	that I am	a single	parent o	f my w	vard(s) an	d furnish	the follo	wing
details	5:								

S.N.	Particular	Details to furnish
1	Name of the ward(s)	1.
		2.
		3.
2	Age of the ward(s)	1.
		2.
		3.
3	Reason for being Single Parent:	Divorce/ Legal Separation/ Adoption/
		Death of Spouse
		(strike out whichever is not applicable)
4	Relevant documentary proof attached:	
	Any of the following document to be	(Mention the Type/Name of document
	attached for claiming for transfer benefit:	attached)
	Legal document for divorce/	,
	Legal separation documents/	
	Legal adoption document for adoption/	
	Death certificate for Death of spouse	

The relevant documentary proof for claiming the transfer benefit under single parent is enclosed also.

Signature of the employee

Date:	
	Verified by ASO/SSA/JSA/Any employee delegated by
	the Controlling Authority
	Signature:

Name:

Designation:

Countersigned by the Controlling Officer with stamp

Name:

Designation: