

Declaration Form –Relocation Policy (New Joiners/Repats)

EMPLOYEE FAMILY STATUS Single EMPLOYEE FAMILY STATUS Single (Single / married / married with children) EFFECTIVE DATE OF RELOCATION: 07 01 202 DD/MM/YYYY I have read, understood and agreed to abide by the provisions of the Relocation Policy. Policy is available on the below link: http://presence/sites/India-HR-Portal/Pages/Employee-Benefits.aspx I acknowledge that the amount paid/reimbursed to me under relocation basis the above said policy will be recovered by the Firm in case I leave the services of the Firm before completing one (1) year in the new location from the effective date of my relocation. Employee's Signature: Date: 1010312021 Place: Pune * The form is required to be submitted to HRES focal for processing the Relocation Benefits.						
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