

DECLARATION FOR AVAILING BHARAT DARSHAN WHERE HUSBAND / WIFE EMPLOYED IN FCI OR IN ANY OTHER ORGANISATION (CENTRAL / STATE / PRIVATE SECTOR / PUBLIC SECTOR UNDERTAKINGS)

(To be submitted in triplicate)

Place :

Date :

- I. 1. Name of the employee in FCI :
2. Present designation :
3. Place of working :

- II. 1. Name of Husband/wife of
(1) above. His/Her present
designation in that organization :
2. Where employed (Complete
address of the employer should be
given ()) :

1) I, _____ (Name of the FCI Employee) and my wife / husband whose official status is as detailed above jointly declare that we have decided to avail Bharat Dharshan facility available to the employees of the FCI for both and we abide by the rules and regulations that are in force and that may be amended from time to time.

2) We hereby declare that particulars furnished above are correct to the best of our knowledge.

Signature :
Husband / Wife

Designation :

Date :

Signature :
FCI employee.

Designation :

Date :

Contd...2

I, _____ (Husband / wife) of

_____ employed under
_____ declare
that I will not be availing Bharat Darshan (Home town) facility available in
_____ (Name of the organization).

Place : Hyderabad.

SIGNATURE

Date :

DISTRIBUTION :

To

Food Corporation of India,