

Designation

COLLEGE OF HORTICULTURE & FORESTRY

CENTRAL AGRICULTURAL UNIVERSITY, PASIGHAT - 791 102

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FORM - 3 See Rule 54 (12)

DETAILS OF FAMILY

:

Date of Birth		:			
Date of appointment		:			
Detai	ls of the member of my family as	on :			
Sl. No.	Name of family members	Date of Birth	Relationship with the employee	Initials of the Head of the Office	Remarks
			1 3		

I hereby undertake to keep the above particulars up to date by notifying to the audit officer/Head of office any addition or alteration.

	(Signature of the Govt. Servant)
Place:	
Date :	Name :
	Designation:

Family for this purpose means

Name of the Government servant

- a. Wife, in the case of male Govt. servant.
- 2. Husband, in the case of female Govt. servant.
- 3. Sons below eighteen years of age and unmarried daughters below twenty one years of age, including such son or daughters adopted legally before retirements.
- 4. Wife and husband shall include respectively judicially separated wife and husband.