

FAMILY DECLARATION FORM
DETAILS OF FAMILY

Name of the Employee _____

Designation _____ Dept. _____

Date of Birth _____ Dt. Of Appointment _____

Details of members of family as on _____

Sr. No.	Name of family members	Date of Birth	Relationship with employee	Income from Pension/ other sources	Remarks

I hereby undertake to keep the above particulars up-to date by notifying to the Head of Office any addition /alteration.

Place: _____

Date: _____

(Signature of employee)

Through: Head of the Dept./Section Head

DECLARATION ACCEPTED

Head of Institution

