

MAHARSHI DAYANAND UNIVERSITY, ROHTAK

(A State University established under Haryana Act No. XXV of 1975) 'A' Grade University Accredited by NAAC

No:

Dated: _____

То

The Registrar, M.D.University, Rohtak

Sub: Availing of LTC for the period 01.04.2023 to 31.12.23 (4th Block year) Sir,

This is with reference to e.mail of the Accounts Branch dated 28.03.2023, I request you to allow the payment of one month's salary in lieu of Leave Travel Concession/ Home Town Concession facility of the 4th Block Year i.e. 2020-23. I may be allowed this facility in the month_____2023.

I further submit that:

- 1. My wife/ husband is not working in M.D.University on any other Government/ Semi Government Department.
- 2. My wife/ husband is also working in _____(name of Government/ Semi Government Department.

Yours Faithfully,

Signature of the employees

Name				

Department/ Branch

Employee No: _____

Mobile No: _____

UNDERTAKING

It is hereby undertaken that:

Vier

- (a) I am eligible to draw the benefit promised by the scheme put in place vide State Govenrment Memo: 13/19/2008-2SII dated 18.5.2009
- (b) None amongst my entitled family members, including the spouse, is either a pensioner or in service under the University or Haryana Government of Central Government or any other State Government or any other organization/ institution/body, etc, wholly or substantially owned or controlled by the Central Government or any State Government.

OR

My entitled family members including the spouse who is a pensioner or in the employment of the University or Haryana Government or Central Government or any other State Government or any other organization/institution/body,etc. wholly or substantially owned or controlled by the Central Government or any State Government and who is also eligible to draw the benefit promised by the scheme put in place vide Memo No. 13/19/2008-2\$ II dated 18.5.2009 shall not avail the benefit separately promised by the scheme for the current block of four years from their employer in whatever form it is extended to him/her by their such respective employer.

OR

None amongst my entitled family members, including the spouse is either in service of Government of Haryana or in service under the Central Government or any other State Government or under any other organization/ Institutional/ body etc, wholly or substantially owned or controlled by the Central Government or any State Government.

(c) I/ We undertake/ declare that the facts stated in the application are correct to the best of our knowledge/belief and that nothing has been concealed therein. In case of any concealment or misrepresentation, legal action may be taken against us under Section 182 Section 415 read with Sec.417 and Section 420 of Indian penal Code as the case may be.

Signature of the concerned employee

Name____

Designation

Countersigned

Signature of the spouse of the concerned employee

Name_

Designation

(Strike off whatever portion is not applicable)

OR