



School of Planning and Architecture, Vijayawada

DECLARATION OF HOME TOWN AND FAMILY MEMBERS FOR LTC

Name of the employee :

Designation & Department :

Home Town :

Distance from Rly. Station /
Airport to Home Town :

Sl. No.	Name	Relation	Age	Occupation
01				
02				
03				
04				
05				
06				

I certify that the above declaration has been made after carefully going through the LTC Rules and I solemnly declare that the particulars furnished above are true and correct to the best of my knowledge and belief. Any misstatement of facts contained therein will render me liable to appropriate action as may be decided by the University.

Signature & Date :

Name :

Department :

For Office Use

Date of Joining School of Planning and Architecture, Vijayawada :

Scale of pay :

LTC available for Block Year :

Home Town recorded in Service Book :

Asst.

Asst. Registrar

Registrar