

CONFIRMATION

SERVICE / GRADE / POST / SERVICE CATEGORY -

NO	NAME, DESIGNATION, PLACE OF WORK	NIC NUMBER	DATE OF APPOINTMENT AND ASSUMING DUTIES	DUE DATE OF FULFILLING REQUIREMENTS FOR CONFIRMATION	DATE OF FULFILLING ALL REQUIREMENTS FOR CONFIRMATION [CERTIFIED DOCS SHOULD BE FURNISHED]	WHETHER DISCIPLINARY / ACTING PERIOD TO BE EXTEND IF SO UNDER WHAT SECTION OF PROCEDURAL RULES OF PSC / E. CODE & THE PERIOD TO BE EXTENDED	IF SO ERASONS	REMARKS
01								
02								

Above information are in order. Therefore the retirement of above officer / officers is / is recommended & submitted for approval please.

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Secretary

Min. of