

AFFIDAVIT

I, _____, son /daughter/wife of _____resident of _____do hereby solemnly affirm and declare as under:-

1. That the particulars of my previous employment(s) are as under:-

S. No.	Name of the Office	Post Held	Period of Service

2. That I aforesaid deponent do hereby solemnly affirm that above information furnished by me is true and correct and in the event of any information is found to be incorrect/false or some material fact is found to have been concealed or suppressed at any stage, my selection / appointment will be liable to be cancelled / terminated without any notice to me.

DEPONENT

Place:-

Dated: