

The President of India

Whereas I, *

a probationer in the Indian Forest Service (hereinafter referred to as the probationer) being entitled subject to compliance with the Indian Forest Service (Probation) Rules, 1968 to receive from the president of India (hereinafter referred to as the Central Government) or from the Government of State to which I may be posted, pay and allowance during the period in which I am under training:

Now, we, the probationer, and the Surety **

(hereinafter referred as "Surety")jointly and severally do hereby in pursuance of the said rules, promise and agree in the event of the failure of the probationer to complete probation to the satisfaction of the Central Government, to refund to the Central Government on demand any money paid to him, including the pay and travelling expenses to join appointment.

The surety hereby agrees that his liability herein under shall not be affected by the Central Government extending the period of probation or giving the probationer an extension of time for payment of or compounding the amount payable hereunder.

Dated the day of, 200

Signature of the probationer

Signed by the probationer in the presence of

Name of witness :

Address:

Occupation

*The full name and address of the probationer should be inserted.

**The surety is required to insert his full name and address and occupation.

Note: Stamp duty payable on this bond shall be borne and paid by the Government

Contd..... 2/-

Signature of Surety :

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Signed by the Surety in the presence of :

.....

Name of witness :

.....

Address :

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Occupation

.....

I, *

whose signature is appended to the above agreement as surety, do hereby declare that I am

** (a) in the permanent service of the Government of

OR

** (b) ordinarily resident in India and that I possess means which will enable me to repay to the Central Government the sums of money referred to in the event of my being called upon to do so in accordance with the terms of the agreement.

Signature of Surety :

.....

:3:

Signed by the Surety in the presence of :

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Name of witness :

Address :

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Occupation

.....

* The surety is requested to insert his full name and address and occupation

** One of these should be struck out.

I, S/D/o Shri
.....

Solemnly declare as under

- (i) That I am unmarried/widower/a widow.
- (ii) That I am married and have only one wife living.
- (iii) That I am married and have more than one wife living. Application for grant of exemption is enclosed.
- (iv) That I am married that during the life time of my spouse I have contracted another marriage. Application for grant of exemption is enclosed.
- (v) That I am married and my husband has no other living wife, to the best of my knowledge.
- (vi) That I have contracted a marriage with a person who has already one wife or more living. Application for grant of exemption is enclosed.

I solemnly affirm that the above declaration is true and I understand that in the event of the declaration being found to be incorrect after appointment, I shall be liable to be dismissed from service.

Place : Signature
:

Dated : Full Name
:
(In Block Letters)

NOTE : Please delete clauses not applicable.

ANNEXURE - III

DECLARATION ABOUT CLOSE RELATIONS

1	Close relations who are Nationals of or are/domiciled in other countries	<u>Name</u>	<u>Nationality</u>	<u>Present Address</u>	<u>Place of Birth</u>	<u>Occupation *</u>
(i)	Father					
(ii)	Mother					
(iii)	Brother(s)					
(iv)	Sister(s)					
(v)	Wife/Husband					
(vi)	Son(s)					
(vii)	Daughter (s)					

Contd...2/

1	Close relations residing in India, who are of non-Indian origin	<u>Name</u>	<u>Nationality</u>	<u>Present Address</u>	<u>Place of Birth</u>	<u>Occupation</u>
(i)	Father					
(ii)	Mother					
(iii)	Brother(s)					
(iv)	Sister(s)					
(v)	Wife/Husband					
(vi)	Son(s)					
(vii)	Daughter (s)					

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.

Signature :

Designation :

Date :

* If in Public Service, give full particulars regarding designation of the post held, name of the department/office, etc. where employed and the date of such employment.

- Note:**
1. Suppression of information in this form will be considered a major departmental offence for which the punishment may extend to dismissal from service.
 2. Subsequent changes, if any, in the above data should be reported to the Head of Office/Department.
